



# FRONT RANGE COMMUNITY COLLEGE

## U.S. ARMED FORCES VETERAN Residency Requirement Waiver

Boulder County Campus  
2190 Miller Drive  
Longmont, CO 80501  
303-678-3722  
Fax: 303-678-3637  
[BCCAdmissions@frontrange.edu](mailto:BCCAdmissions@frontrange.edu)

Brighton Center  
1850 E. Egbert Street  
Brighton, CO 80601  
303-404-5099  
Fax: 303-655-1763  
[Frcb.brightoncenter@frontrange.edu](mailto:Frcb.brightoncenter@frontrange.edu)

Larimer Campus  
4616 South Shields  
Fort Collins, CO 80526  
970-204-8107  
Fax: 970-204-8365  
[LCAdmissions@frontrange.edu](mailto:LCAdmissions@frontrange.edu)

Westminster Campus  
3645 West 112<sup>th</sup> Avenue  
Westminster, CO 80031  
303-404-5414  
Fax: 303-404-5150  
[WCAdmissions@frontrange.edu](mailto:WCAdmissions@frontrange.edu)

*This application is for Honorably Discharged Veterans of the Armed Forces of the United States (Army, Navy, Air Force, Marines, Coast Guard), who are not members of the Colorado National Guard, who otherwise would not qualify for in-state tuition as one-year residents of Colorado, to apply for in-state tuition. Under HB 1039, students qualifying for in-state tuition on this basis will qualify for the Colorado Opportunity Fund (COF) but do not qualify for Colorado resident Financial Aid programs.*

**The deadline to submit this form is 30 days after the start date of the term. Students are required to submit this form once every 12 months. The student can only use this benefit for up to (6) terms as the Act states that you meet the "presumptions and rules for maintaining a domicile in Colorado..." (23-7-108.5)**

Term (check one):  Summer  Fall  Spring Year: \_\_\_\_\_

Student Veteran Name: \_\_\_\_\_  
Last Name First Name

Student ID: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_@student.cccs.edu

1. Service Branch: \_\_\_\_\_

2. Date of Discharge (mo/day/year): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

3. Type of Discharge:  Honorable  General

**4. If discharged, provide a certified copy of Form DD214 (long version, including items 23 through 30).**

5. If you enroll while on terminal leave, indicate when a certified copy of Form DD214 will be available (mo/day/year): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

6. Did you move to Colorado intending to make Colorado your Permanent home?  
(choose one)  Yes  No

Signature of Student Veteran

Date

Please contact your tuition classification officer for other options on qualifying for in-state residency.