

UNIVERSITY OF COLORADO AT DENVER
RECORDS AND REGISTRATION
CAMPUS BOX 167
P.O. BOX 173364
DENVER, COLORADO 80217-3364
(303) 556-2389

VERIFICATION OF PERMANENT DUTY STATION FOR NONRESIDENT, ACTIVE DUTY MILITARY PERSONNEL
OR MILITARY DEPENDENTS REQUESTING IN-STATE TUITION CLASSIFICATION

Student's Name: _____ Student Number: _____ Term: _____

Student Classification: Active Military Personnel _____ Military Dependent _____

If student is a military dependent, provide the name and rank of the military sponsor: _____

Provide a copy of both sides of the student's U.S. Government identification card. If the student is a dependent, a copy of the military sponsor's identification card is also required. The form is valid for one semester only, a new form must be submitted for subsequent terms. This form must be dated no earlier than thirty days prior to the first day of class and submitted no later than the end of the first week of class.

*****BASE EDUCATION OFFICER MUST COMPLETE THE FOLLOWING*****

_____ is an active duty member of the armed forces of the United States and permanently stationed in Colorado
name of military member

at _____. This permanent duty commenced on _____ and will terminate on _____.
name of duty station date date

Signature: _____ Date: _____ Title: _____

Name: _____ Command Address: _____

*****Registrar's Office Use Only*****

Date received in records: _____

Clerk: _____