

# UNIVERSITY of NORTH CAROLINA PEMBROKE

## CHOICE ACT

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Under G.S. 116-143.3A certain veterans and other individuals entitled to federal education benefits under 38 U.S.C. Chapter 30, Chapter 31, or 38 U.S.C. Chapter 33 may be eligible to be charged the in-state tuition rate and applicable mandatory fees for enrollment without satisfying the 12-month residency requirement under G.S. 116-143.1.

### REQUIRED DOCUMENTATION

#### **Veteran:**

- Copy of veteran's DD214 (official or working copy) with a separation date within the last 3 years
- Certificate of Eligibility from the Department of Veteran's Affairs
- Proof of abode in North Carolina (proof of above includes, but is not limited to: copy of lease, deed, a letter from landlord, a letter from a friend or relative with who you are living, or verification of campus housing).
- Proof you are living at the address provided. Proof of domicile includes but is not limited to a current driver's license, vehicle registration, or recent utility bill).

#### **Spouse/Dependent Child of Veteran or Other Covered Individual:**

- Copy of veteran's DD214 (official or working copy) *or* if on active duty, copy of most recent orders
- Transfer of Entitlement from Department of Veterans Affairs
- Proof of abode in North Carolina (proof of above includes, but is not limited to: copy of lease, a letter from landlord, a letter from a friend or relative with who you are living, or verification of campus housing).
- Proof of domicile in North Carolina includes but is not limited to: a current driver's license, vehicle registration, or recent utility bill).

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**STUDENT INFORMATION**

Student's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

UNCP E-mail Address: \_\_\_\_\_@bravemail.uncp.edu Banner ID: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

For applicants who will be a veteran or are the spouse or dependent child of a veteran or a dependent or active duty service member using Chapter 30, Chapter 31, or Chapter 33 U.S. Department of Veterans Affairs benefits at the time of enrollment (enrollment = first day of the term).

**INFORMATION REGARDING VETERAN / MILITARY SERVICE MEMBER**

1. For the veteran or service member through whom you claim the tuition benefit, provide the following:
  - a. Date of initial entry into military service (mm/dd/yyyy): \_\_\_\_\_
  - b. Discharge or retirement date (mm/dd/yyyy): \_\_\_\_\_

2. Do you currently live in North Carolina or will you be living in North Carolina on the first day of the term? ☐ Yes ☐ No

**If yes, please attach PROOF OF ABODE IN NORTH CAROLINA. Proof of abode includes, but is not limited to: copy of lease, deed, a letter from landlord, a letter from a friend or relative with who you are living, or verification of campus housing AND copy of a current driver's license, vehicle registration, or recent utility bill.**

3. When and from what state or foreign country did you move your home to North Carolina?  
Moved on (mm/dd/yyyy): \_\_\_\_\_ Moved from: \_\_\_\_\_

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**INFORMATION REGARDING VETERAN / MILITARY SERVICE MEMBER (cont'd)**

4. Have you been academically admitted to this institution?

☐ Yes ☐ No If no, have you applied for admission? ☐ Yes ☐ No

5. Beginning with what academic term are you seeking the tuition benefit?

☐ Fall ☐ Spring ☐ Summer I ☐ Summer II Year: \_\_\_\_\_

6. Are you eligible for OR have you been transferred Chapter 33 (post 9/11 Educational Assistance) U.S. Department of Veterans Affairs?

☐ Yes ☐ No

**If yes, please attach VA certification of CERTIFICATE OF ELIGIBILITY or TRANSFER of ENTITLEMENT (if using transferred benefits) from the Dept. of Veteran's Affairs**

**Student Attestations:**

You must sign your initials by each statement in the sections that are applicable to you to indicate that you have read and understand these statements. Failure to initial by each statement in the applicable sections may result in your application being returned and will delay processing. If need clarification before initialing a section(s), contact the Undergraduate Admissions Office at 910-521-6262.

**ALL STUDENTS:**

- ☐ I understand that the burden of proof is on me, the applicant, to demonstrate that I qualify for the benefit of a reduced tuition rate as the spouse or dependent child of the armed services or transferred education benefits under Chapter 31 U.S. Department of Veterans Affairs, or as an eligible veteran under Chapter 33 (Post 9/11) U.S. Department of Veteran Affairs (Choice Act), or the dependent or active duty service member using Chapter 30 U.S. Department of Veterans Affairs benefits.
- ☐ I understand that if it is determined that I am not eligible for the in-state tuition rate then I will be responsible for and charged at the out-of-state tuition rate.
- ☐ I acknowledge that if I am granted the resident tuition rate based on my resident status, it is my responsibility to notify the Admissions Office if a change occurs in my status that may render me ineligible for this benefit.

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## SIGNATURE AND CERTIFICATION BY STUDENT

By signing, I certify that all information I have set forth herein is true to the best of my knowledge, pursuant to my reasonable inquiry where needed. I hereby acknowledge that the institution may verify the information set forth herein from sources accessible under the law to the institution, but that the institution may divulge the contents of this application only as permitted under the Family Educational Rights and Privacy Act (FERPA) of 1974 if I am, or have been, in attendance at this institution.

I also understand that my eligibility to receive the UNC employee in-state tuition benefit continues only so long as the requirements set forth in N.C. G.S. 116-143.3A and any other applicable provisions of the state and federal law continue to be met. My eligibility may be reviewed by the University at any time.

I am currently living in North Carolina or will be living in North Carolina on the first day of the term for which I am applying. I intend to establish North Carolina as my abode and submitting this form serves as my letter of intent.

I certify that all the information I have provided is true to the best of my knowledge. I understand that knowing falsification of this application may result in revocation of my admission and/or a violation under the institution's Student Code of Conduct.

Finally, I understand that I must advise the University of any change in the facts or circumstances that may impact my benefit status. If, at any time, it is discovered that my benefit status was obtained using false or fraudulently submitted information, the University shall have the right to seek and collect payment of full, out-of-state tuition for the applicable semester(s), along with any fees and costs associated with such collection.

\_\_\_\_\_  
**Student Signature** Date: \_\_\_\_\_

\_\_\_\_\_  
**Parent or Legal Guardian Name** (if student is under the age of 18) Date: \_\_\_\_\_

\_\_\_\_\_  
**Parent or Legal Guardian Signature** (if student is under the age of 18) Date: \_\_\_\_\_

Submit your form and supporting documents in **ONE** of the following ways:

**In Person:**  
UNC Pembroke  
Academic & Military Outreach  
Hickory Hall North 207

**Email:**  
[veterans@uncp.edu](mailto:veterans@uncp.edu)  
**By Fax:**  
(910) 775-4511

**MAIL TO:**  
UNC Pembroke  
ATTN: Academic & Military Outreach  
P.O. Box 1510  
Pembroke, NC 28372-1510

**For Security:** Documents must be legible and ensure no account numbers or SSN's are visible.

There is no deadline for the submission of this form and supporting documentation.

This publication is available in alternative formats upon request. Please contact the Accessibility Resource Center, D.F. Lowry Building, Room 107, or call 910.521.6695.