

2025-2026 OUT of STATE TUITION WAIVER

(MUST APPLY EACH SEMESTER)

tudent Name:		Date:	Date:		
Address:					
ID Number:	Semester (Choose 1):	FALL	_ SPRING _	SUMMER	
Do you currently work in Arkansa	s?	()	YES	() NO	
If not currently work in Arkansas, Did you work in Arkansas within	the last six month?	()	YES	() NO	
Are you a dependent of someone who currently Works or has worked in Arkansas with in the last Six months?		()	YES	() NO	
DOCUMENTATIO	N IS NEEDED FOR EA	ACH SEM	ESTER EN	ROLLED	
Act 1180 of 1999 allows McCurta of-state tuition waiver at UA Coss In order for UA Cossatot to be elig Cass counties to provide these doc	atot. gible for a tuition adjustment,				
institution of higher educ 2. Documentation (W-2 form Arkansas employer of mi	n or copy of Arkansas income nimum of \$5,500.00 in the tax an Arkansas employer or cur nts is a dependent of a nonresi	e tax form as x year precedi rent employn dent Arkansa	filled) or receiping enrollment at a minimal sincome taxpa	pt of wages from an , OR num of current year	
	Waiver does not apply tow	ards online	courses.		
of whether the student is rec If total financial aid funds ex Students receiving UA Coss Please refer to student handl If student is receiving financ It is the policy of UA Cossatot to unlawful factors in the admission	atot waivers must be meeting Fedook and CCCUA website. cial aid that is tuition specific, UA not to discriminate on the basis of rac on and treatment of students. with applicable laws and regulations in or can be reached by call 870.584.447	I reduce or elinderal Financial A Cossatot will e, color, national	ninate institution Aid Satisfactory reduce or cance origin, sex, age, r	nal funds. y Academic Progress. el UA Cossatot waiver. religion, disability or other ment, admission, programs and	
Student Signature			Date		