

Application to Receive Benefit Married and Domestic Partner Tuition Benefit

Procedures and Eligibility Requirements:

- Married couples must have maintained marital status for at least six (6) months prior to applying for this benefit.
- Each student is eligible for a tuition remission benefit of \$1,000 per quarter for each quarter of concurrent enrollment, up to a maximum of \$14,000 (14 DC quarters).
- Each student may receive this benefit only once while attending Life University.
- Both Students Enrolled in the Doctor of Chiropractic (DC) Program

Each qualified individual will receive:

- 50% of the total benefit in the 13th quarter, and
- Remaining 50% in the 14th quarter
- Disbursement is contingent upon:
- Verification of the qualifying relationship, and
- Continued compliance with SAP requirements.

One Student in DC and One Student in a CGUS Program

The DC student will receive:

- 50% of the total benefit in the 13th quarter, and
- Remaining 50% in the 14th quarter

Disbursement is contingent upon:

- Verification of the qualifying relationship, and Both individuals meet SAP requirements.
- DC Legacy Student Benefit (Parent or Sibling Alumni)

A currently enrolled student in the Doctor of Chiropractic (DC) program may qualify for the tuition benefit if they have a parent or sibling who has graduated from Life University's Doctor of Chiropractic program.

- Concurrent enrollment with the qualifying family member is not required for legacy eligibility.
- The student must be enrolled full-time and meeting Satisfactory Academic Progress (SAP).
- The qualifying parent or sibling must have successfully completed the DC program at Life University.
- The student is eligible for a tuition benefit of \$1,000 per quarter, up to a maximum benefit of \$14,000 (fourteen [14] quarters).

We, the following individuals:

(Print Name 1) _____

and (Print Name 2) _____

hereby submit this application to qualify for the Married and Domestic Partner Tuition Benefit. We attest that all information and documentation provided is true.

Qualifying Relationships

Please check box to indicate type of relationship and provide indicated documents.

☐ Family Membership

Qualified family members are defined as: **Child** - biological, step or adopted, **Parent** - biological, step or adoptive, **Sibling** - two or more children having one or both parents in common.

- ☐ Each student must provide a copy of his/her birth certificate.

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☐ Legacy Relationship

A current Life University student who has an immediate family member (parent or sibling) who has graduated from Life University's Doctor of Chiropractic (DC) program.

Legacy Relationship Verification

- The student must provide documentation verifying the relationship to the Life University graduate (e.g., birth certificate or other official records).
- The student must provide a copy of the Life University diploma for the qualifying parent or siblings.
- If a copy of the diploma is not available, the Office of Financial Aid may verify the graduate's attendance and completion through institutional records.

☐ Married Couple

A married couple is defined as two individuals who are legally married under applicable federal and state law. The individuals must be in a committed relationship, reside together, demonstrate financial interdependence, and share common necessities of life.

- ☐ The couple must provide a copy of their state marriage certificate.
- ☐ In addition, the couple must provide two of the following documents:
 - ☐ A copy of a joint lease or mortgage (proof of shared residence).
 - ☐ A copy of a joint bank account or credit card statement.
 - ☐ A copy of a joint utility bill.
 - ☐ Copies of Driver's License with the same address.

Eligible Participants:

Married couples or family members who:

- Concurrent enrollment is required for married couples and qualified family member benefits. This requirement does not apply to legacy student eligibility and
- Are meeting Satisfactory Academic Progress (SAP) as defined by the Office of Financial Aid.

For use by Office of Financial Aid only:

Date/quarter application received _____ day of _____, 20____.

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University

Included with this application is all required documentation.

We understand that this benefit is not automatic, we have read the policy statement, and we understand that the policy, process information and all forms are available through the www.life.edu/financialaid-forms.

We understand that upon dissolution of a benefit-approved relationship a Termination of Qualified Relationship form must be filed with The Office of Financial Aid within 30 days, and at that time we will cease to qualify for this benefit.

We also understand that any fraudulent action, statement or document provided to qualify for or receive this benefit may be cause for Life University to pursue legal action, against both named individuals, to recover any loss including reasonable attorney's fees.

Signature 1 _____ LIFE Student ID # _____

Signature 2 _____ LIFE Student ID # _____

State of _____

County of _____

Personally appear before me the above named _____

and _____ ,

personally known to me, who, being duly sworn, depose and say that they executed the above instrument and that

the statements contained therein are true and correct to the best of their knowledge and belief.

Subscribed and sworn to me this _____ day of _____, 20 _____ .

Notary Public _____

My Commission Expires _____

Stamp Seal Here

For use by Office of Financial Aid only:

Date/quarter application received _____ day of _____, 20 _____.