

UTAH NATIONAL GUARD STATE TUITION ASSISTANCE

For additional information, hover over each field for detailed guidance

Control Number:

SECTION ONE: APPLICANT INFORMATION

Member Name: Last	First	M.I.	Separation Date	Rank	Component	Today's Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Military Email Address	Civilian Email Address	Phone Number	Using Post-9/11 Benefits?	Duty Status		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		

SECTION TWO: EDUCATIONAL INSTITUTION / CERTIFYING SCHOOL OFFICIAL CONTACT

Name of School / Institution	Address	City	State	Zip Code	Phone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Student ID	Area of Study / Program	Degree Type	GPA	Remaining Credit Hrs.	Class Start Date	Class End Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Member's Typed Initials Signifying Review and Certification

AGREEMENT SIGNIFIED BY MEMBER INITIALS: I have reviewed and completed this application in accordance with the Utah State Tuition Assistance Policy. Submitting this application to the STA Officer implies that I have read and agree to the Statement of Understanding. The information I have provided is true and correct.

SECTION THREE: COURSE AND TUITION INFORMATION

Course Number	Course Title / Description	Credit Hours	Cost per Credit Hour or Total Certificate Cost	Fees	Class Cost	Paid By State Office Use Only	Paid By Member Office Use Only
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TOTALS:				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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Email completed application to: FOR AIR GUARD: 151.ARW.STA.org@us.af.mil FOR ARMY GUARD: ng.ut.utarnng.mbx.education-office@army.mil

SECTION FOUR: STATE TUITION ASSISTANCE ADMINISTRATION ACKNOWLEDGMENT & APPROVAL (STA OFFICE USE ONLY)

Name of STA Verifying Official	Verifying Official Signature	Contact Phone Number	Date	STA Account Data
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Remaining STA Amount: <input type="text"/>
Name of STA Payment Authorization Official	Payment Authorization Signature	Contact Phone Number	Date	For STA Change Requests
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Previous STA Number: <input type="text"/>
				Date Change Received: <input type="text"/>

Administrator Notes:

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SECTION FIVE: INSTITUTION ENDORSEMENT AND VALIDATION (To be completed upon course completion)

Member Name ,

Class Start Date

Class End Date

Service Members will ensure this section is accomplished AFTER the approved courses/classes have been completed. Service Members utilizing State Tuition Assistance must show validation that the courses approved in this STA form align with a degree plan or certificate program and have been completed successfully. **The final, completed, Utah National Guard State Tuition Assistance form, with Institution Endorsement, must be submitted to an STA Administrator no less than 30 days after course completion.** The instructions below outline the process to complete this section.

- 1) Within **45 days** of course completion, provide a printed copy of the approved STA form to an authorized School Certifying Official (SCO). This may be an academic advisor / counselor, Veteran’s Administration liaison, school bursar or financial counselor.
- 3) The School Certifying Official (SCO) will verify the information below (Degree Plan and Course Grade).
 - a) The SCO will annotate whether the class was part of a degree plan with a “Yes” or a “No” in the field adjacent to the specific class.
 - b) The SCO will annotate the course grade in the field adjacent to the specific class.
- 4) The School Certifying Official sign the form attesting to the course requirement and grade.
- 5) The Service Member will scan this page (Page 2) and return it to the State Tuition Assistance managers within **45 days** of class/course completion.

Educational Institution	School Certifying Official (SCO) Name	SCO Phone Number	SCO Email Address
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Course Number	Course Title / Description	Class Part of Degree Plan (Yes/No)	Course Grade (A-F, I, W, etc.)	School Certifying Official Notes	STA OFFICE USE ONLY
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I certify that the completed courses and/or classes meet the coursework stipulated in the student’s academic goal and/or degree plan on file. Furthermore, I certify that the grades listed above are accurate.

School Certifying Official Signature

Date

SECTION SIX: INVOICE / BILLING INSTRUCTIONS

Educational Institutions please send a copy of this form and an invoice to:

Utah National Guard, Attention: SMD
12953 South Minuteman Drive
Draper, Utah 84020-9286

Email: smd@utah.gov

Educational Institutions can contact the Education Service Office at:

Billing / Invoice Inquiries: **801-432-4442**
 STA Program Inquiries: **801-432-4534**