



Application for Massachusetts Categorical Tuition Credit Award Year 2019-2020

Name: _____
(Please Print)

Mailing Address: _____

City/State/Zip: _____

Phone: _____ Student ID#: _____

Categorical Tuition Credit Applying for:

- _____ Massachusetts Rehabilitation or Commission for the Blind Tuition Credit
- _____ Native American Tuition Credit
- _____ Senior Citizen Tuition Credit

Below tuition credits also require [Veterans Services Certification Request](#) be completed each semester through Office of Veterans Services

- _____ Veteran Tuition Credit
- _____ Member of Armed Forces Tuition Credit
- _____ National Guard

I understand that in order to be eligible for a categorical tuition credit at the University of Massachusetts Lowell I certify that I meet the following criteria:

- I have been a lawful Massachusetts resident for at least one year prior to the start of the academic term/s for which the Massachusetts categorical tuition credit is being sought. _____ **Initial**
- I am enrolled in at least 3 undergraduate credits in a degree program. _____ **Initial**
- I am a United States citizen or eligible non-citizen. _____ **Initial**
- I will also complete an appropriate year Free Application for Federal Student Aid (FAFSA), IF, I will be applying for need-based financial aid during the same academic year for which I am seeking the Massachusetts categorical tuition credit. _____ **Initial**
- I am in compliance with Selective Service Registration laws. _____ **Initial**
- I am not in default of any federal student loans or owe a refund for any previously received financial aid. _____ **Initial**
- I am not in default of any Massachusetts State student loans or owe refunds to any Massachusetts State financial aid programs. _____ **Initial**
- I will furnish the institution with any and all documentation that is required in the determination of their eligibility for the Massachusetts categorical tuition credit. _____ **Initial**

By signing this statement, I am confirming that I meet the above criteria and am therefore eligible to receive the Categorical Tuition Credit at the University of Massachusetts Lowell.

Signature

Date

Return form to:
Student Financial Services
220 Pawtucket Street, Suite M30
Lowell, MA 01854-5110

Email to: CategoricalApplication@uml.edu
Fax to: (978) 934-3057