

**MTSU Financial Aid
Tennessee Education Lottery Scholarship
Military Service Appeal Form**

Please Note:
You should receive a response via your **campus email** in 3-4 weeks. Responses may be delayed if the state needs to verify your eligibility.

Mailing Address: MTSU Box 31, 1301 E. Main St., Murfreesboro, TN 37132;
Office Location: 206 James Union Building;
Fax: (615)494-7770

If you do not meet residency requirements because of your parent's military service but are otherwise eligible for a lottery scholarship, use this form to request a military exception on residency. If you did not or will not meet enrollment requirements because of your military service (for example, if you withdrew from all classes or did not enroll for a semester), use this form to request a military leave of absence.

Name: _____ **MTSU ID # :** M _____
Email Address: _____@mtmail.mtsu.edu **Phone:** (_____) _____

Indicate the type of appeal:

- I did not enroll for one or more required semesters due to military service.
- I changed my enrollment status or withdrew due to military service.
- I did not enroll within 16 months of high school graduation or GED due to military service.
- I do not meet residency requirements and/or did not attend an eligible Tennessee high school, due to military service or full-time DOD employment of one or both parents.

Please list the dates of military service: Start _____ End _____

Where were you or a parent stationed? _____

In which semester will you reenroll? _____

Have you previously filed a TELS appeal for any reason? Yes No

To appeal, provide the following information: **(Appeals will not be reviewed without verifiable documentation.)**

1. A copy of your DD214, showing a discharge other than dishonorable.
2. A copy of your orders, showing the dates and location of service.
3. If petitioning for residency, documentation from the military showing that Tennessee is the State of Record.
4. A personal statement regarding your situation.

Please initial:

_____ *I verify that all of the above statements and attached documentation are true and accurate.*

_____ *I understand that I must enroll within 1 year of discharge and within 7 years of high school graduation to be eligible for a Tennessee Education Lottery Scholarship.*

_____ *I authorize the MTSU Financial Aid Office to release information to the Tennessee Assistance Corporation (TSAC) for review of my appeal.*

Student Signature: _____ Date: _____

For Office Use Only Request is: Approved Denied
Signature of IRP or Director: _____ Date: _____
Comments: _____
Updated: Egrands SZATELS RHACOMM RPAAWARD Decision Letter