



Sam Houston State University

MEMBER THE TEXAS STATE UNIVERSITY SYSTEM

OFFICE OF THE REGISTRAR

Application for Disabled Texas Peace Officer or Texas Firefighter Exemption

First Name: _____ Last Name: _____

Sam ID: _____ Username: _____ Phone #: _____

Texas Residential Address: _____

Indicate the Term for the Exemption to Apply: Fall 20 _____ Spring 20 _____ Summer 20 _____

Select One:

<input type="checkbox"/> <u>Peace Officer*</u>	<input type="checkbox"/> <u>Firefighter*</u>
<ul style="list-style-type: none"> • Permanently disabled as a result of an injury suffered during the line of duty as a peace officer of Texas and is unable to continue employment as a peace officer because of the disability. • Must be a resident of Texas (resided in this state for the 12 months immediately preceding the beginning of the semester) • Undergraduate students require a GPA of 2.0 or Higher • Graduate students require a GPA of 3.0 or Higher • Maintain Satisfactory Academic Progress (SAP) score of 3 or lower • A student may not receive the exemption for more than 12 semesters while the student is enrolled in an <i>undergraduate</i> program or while the student is attending only <i>undergraduate</i> courses. 	<ul style="list-style-type: none"> • Permanently disabled as a result of an injury suffered during the line of duty as a firefighter in Texas and is unable to continue employment as a firefighter because of the disability. • Must be a resident of Texas (resided in this state for the 12 months immediately preceding the beginning of the semester) • Undergraduate students require a GPA of 2.0 or Higher • Graduate students require a GPA of 3.0 or Higher • Maintain Satisfactory Academic Progress (SAP) score of 3 or lower • A student may not receive the exemption for more than 12 semesters while the student is enrolled in an <i>undergraduate</i> program or while the student is attending only <i>undergraduate</i> courses.

*Requirements based on Texas Education Code 54.352

Please submit a letter from your employer on official letterhead, stating the student was permanently disabled during the line of duty and unable to continue employment as a peace officer/firefighter due to their disability, with this application.

STUDENTS ARE RESPONSIBLE FOR ANY ADDITIONAL TUITION AND FEES THAT MAY NOT BE COVERED BY THIS EXEMPTION.

Student Signature: _____ Date: _____

Applications will not be accepted until semester **charges are posted to student accounts**. Applications may be accepted until **census day**. Please note, students are responsible for meeting all payment due dates for the semester.

Submit applications to: regforms@shsu.edu

Registrar's Office Use Only:	
Date Received: _____	Processed By: _____
Texas Resident(SPAIDEN): <input type="checkbox"/> Yes <input type="checkbox"/> No	GPA: _____ SAP Score (ROASTAT): _____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied - Reason: _____	Attribute Added: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Cashier's Notified: _____	Date Student Notified: _____