

### APPLICATION FOR CHILD OR SPOUSE OF PUBLIC SAFETY OFFICER'S (CVO) TUITION REMISSION PROGRAM 2013-14 ACADEMIC YEAR APPLICATION

State Form 52020 (R9 / 4-13) Indiana Commission for Higher Education, Division of Student Financial Aid

Please note that all students are **required** to file a clean, edit-free **Free Application for Federal Student Aid** (FAFSA) <u>each year at least thirty (30) days prior to the end of the semester</u>. This federal government form can be filed online at <u>www.fafsa.ed.gov</u>

This state of Indiana program—the *CVO Program*—provides tuition and fee assistance at public colleges for eligible <u>children and spouses of certain Indiana public safety officers killed in the line of duty</u>. As a supplement to other state financial aid, the grant pays for approved tuition and regularly assessed fees; it does not cover nontuition fees such as room and board or books. Students who might be covered under the establishing Indiana Codes (IC 10-12-2-11, IC 21-14-6-2 or IC 21-14-6-3) are:

- (1) Child of Public Safety Officer. IC 35-47-4.5-3 defines a public safety officer as: a state police officer, a county sheriff or police officer, a correctional officer, an excise police officer, a city police officer, a reserve officer (city or county), a conservation officer, a gaming agent or control officer, a town marshal or deputy town marshal, a state educational institution officer, a probation officer, a publicly employed firefighter, a publicly employed emergency medical technician, a publicly employed paramedic or a member of consolidated law enforcement. For the student to receive this benefit, the public safety officer must have been killed in the line of duty, and must have been a resident of Indiana at the time of death. The student must have been twenty-three (23) years old or younger on the date of the officer's death, and the biological or legally adopted dependent child of the covered public safety officer. The student must be full-time and degree-seeking, and may be graduate, undergraduate, or professional degree level, although all payment is restricted to undergraduate tuition and fee levels. The benefit does not apply to a high school student taking college courses. The benefit is for eight (8) semesters. If the child first becomes eligible after June 30, 2011, the benefit must be used within eight (8) years after the date the child first applied.
- (2) Spouse of Public Safety Officer. For the surviving spouse to receive this benefit, the public safety officer must have been killed in the line of duty, and must have been a resident of Indiana at the time of death. The spouse must have been married to the covered public safety officer at the time of death. The student must be degree-seeking, and the benefit is limited to undergraduate or professional degree level study. The benefit does not apply to a high school student taking college courses. The benefit is for 124 credit hours. If the spouse first becomes eligible after June 30, 2011, the benefit must be used within eight (8) years after the date the spouse first applied.
- (3) Child of State Trooper Permanently Disabled. The state trooper must be an employee beneficiary of the state police. For the student to receive this benefit, the state trooper must have been permanently and totally disabled from a catastrophic injury sustained in the line of duty and unable to work. The student must be twenty-two (22) years old or younger to receive the benefit, the biological or legally adopted dependent child of the covered state trooper, and must be a full-time degree-seeking student. The student may be graduate, undergraduate, or professional degree level, although all payment is restricted to undergraduate tuition and fee levels. The benefit does not apply to a high school student taking college courses. The benefit is for 124 credit hours. If the child first becomes eligible after June 30, 2011, the benefit must be used within eight (8) years after the date the child first applied.
- (4) Spouse of State Trooper Permanently Disabled. The state trooper must be an employee beneficiary of the state police. For the spouse to receive this benefit, the state trooper must have been permanently and totally disabled from a catastrophic injury sustained in the line of duty and unable to work, and the spouse must have been married to the state trooper at the time of disability. The student must be an undergraduate or professional degree-seeking student. The benefit does not apply to a high school student taking college courses. The benefit is for 124 credit hours. If the spouse first becomes eligible after June 30, 2011, the benefit must be used within eight (8) years after the date the spouse first applied.



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Some program restrictions apply and financial assistance may be limited. Both children and spouses must be regularly admitted as in-state students to one of the public colleges listed below and must maintain satisfactory academic progress (as defined by the college) while receiving the fee remission. Other restrictions might apply.

The completed application – pages 3 and 4 of this document – and all necessary supporting documentation must be submitted to the Division of Student Financial Aid (SFA) at least thirty (30) days before the end of the college term. Each child (and spouse) must submit a separate application and they must re-apply whenever they change schools or interrupt enrollment for two semesters or more. The approved application will be returned to the applicant. It must be presented at the financial aid office of the chosen college in order to receive the fee remission benefit. If the application is not approved, the student will be notified in writing. The application and supporting documentation must be mailed to the following address:

Child or Spouse of Public Safety Officer's (CVO) Tuition Remission Program Division of Student Financial Aid Indiana Government Center South 402 West Washington Street, Room W462 Indianapolis, IN 46204

Telephone: (888) 528-4719

www.in.gov/che/

Faxed or incomplete documents will not be accepted.

### Eligible Indiana Colleges for the CVO Program:

School	Code	School	Code	School Code
Ball State University	001786	Indiana University Kokomo	001814	Purdue University Calumet 001827
Indiana State University	001807	Indiana University Northwest	001815	Indiana University Purdue University Fort Wayne  001828
Indiana University Bloomington	001809	Indiana University South Bend	001816	Ivy Tech Community College of Indiana – 009917 All Campuses
Indiana University East	001811	Indiana University Southeast	001817	University of Southern 001808
Indiana University Purdue University Indianapolis	001813	Purdue University West Lafayette	001825	Vincennes University 001843
Indiana University Purdue University Columbus	E01033	Purdue University North Central	001826	WGU Indiana 033394



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\* This agency is requesting disclosure of your Social Security Number in accordance with IC 4-1-8-1; disclosure is mandatory and this record cannot be processed without it.

### Please complete both sides of this application. This application must be completed in INK.

1. Please check whether you are a **<u>child</u>** or **<u>spouse</u>** of the covered publicly employed safety officer. Check one box only.

Child	Spouse	Covered publicly employed safety officer (Refer to page 1 for more details.)			
		A regular, paid law enforcement officer killed in the line of duty (refer to number 1)			
		A regular, paid firefighter killed in the line of duty (refer to number 1)			
		A volunteer firefighter (as defined in IC 36-8-12-2) killed in the line of duty (refer to number 1)			
		A county police reserve officer killed in the line of duty (refer to number 1)			
		A city police reserve officer killed in the line of duty (refer to number 1)			
		A permanently and totally disabled state police trooper (refer to number 3, 4)			
		A paramedic (as defined in IC 16-18-2-266) killed in the line of duty (refer to number 1)			
		An emergency medical technician (as defined in IC 16-18-2-112) killed in the line of duty (refer to number 1)			
		An advanced emergency medical technician (as defined in IC 16-18-2-112.5) killed in the line of duty (refer to number 1)			

Remarried spouses: The children of a remarried surviving spouse, or the spouse herself or himself, are eligible to be considered for the CVO Program. If you are a child whose surviving parent has remarried or an eligible spouse who has remarried, please check here \_\_\_\_. Complete the following table with your current (legal) name.

2. Please complete the following about **yourself (the student applicant)**. Please print.

Name (first, middle initial, last)	E-mail Address							
Social Security Number*	Telephone Number ( )							
Address (number and street, city, state, and ZIP code)								
Please select from the list on page 2 the college you plan on attending next term.								
College Name	College Code	Date of Enrollment (mm/dd/yyyy)						

#### This section applies to children only.

3. In order to be eligible, you must be the biological child of the covered public safety officer or legally adopted by that covered public safety officer. If legally adopted, it must have been when you were less than twenty-four (24) years of age; not married; had no dependents of your own; and not a veteran of the armed forces. Adoption by the spouse of a covered public safety officer is not valid for inclusion of a child in the CVO Program. Adoption must be in effect before application for the benefits is submitted.

Please write your initials in the appropriate space:

- a) I am the biological child of the covered public safety officer: \_\_\_\_\_
- b) I was legally adopted by the covered public safety officer. I have attached a copy of the legal documents indicating when and where I was adopted: \_\_\_\_\_
- c) I am not the biological child nor was I legally adopted: \_\_\_\_\_



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4. Please complete the following about the **covered public safety officer** at the time of his or her death, or if a permanently disabled state police trooper, the current information:

•	y diodoloc	state police trooper, the current if							
First Name		Middle Initial	Last Na	ıme					
Social Security Number*		Date of Birth (mm/dd/yyyy)	Date of	Death or Disability (mm/dd/yyyy)					
Address (number and street, city	, state, and	ZIP code)							
,		,							
I attest that the covered public safety officer was a public employee and a legal resident of the state of Indiana at the time he or she was killed in the line of duty or that he or she is a permanently and totally disabled Indiana State Police trooper.									
Your signature			Date (mm/dd/yyyy)						
	Pı	ublic Safety Officer Employer Inf	ormation						
Position of Covered Officer		Name of Public Employer		one Number of Employer					
				• •					
Address of Employer (number and street, city, state, and ZIP code)									
Required Attachments:									
	£	ot Officers City and County Dec	Off:	F					
		nt Officers, City and County Res cy Medical Technicians and Par							
		two items: (1) a copy of the official							
		ng to the information you have sup							
		the public safety department and s							
		I be verified through the 1977 Police							
		mergency Medical Service Agency							
(ISP) or other entities as a			(OLIVI) VLI	vio), the maidra state i shoc					
` '									
		anently and totally disabled:							
		a physician's letter that states the t							
disability. The letter must	be on the	physician's stationery and signed	by the phys	sician.					
Latte of that the factorine	11	where an discount of the form		-4-46-46-4-4-4-4-4-4-4					
		given on this application is true at I have read and understood the							
Your signature	ii, and tii	at Thave read and anderstood th	Date (mm/dd/yyyy)						
rour signature			Date (ii	ши аалуууу					
The application and suppo	orting doc	umentation must be mailed to the f	ollowing a	ddress:					
Child or S	Spouse o	of Public Safety Officer's (CVO) T	uition Rer	nission Program					
Child or Spouse of Public Safety Officer's (CVO) Tuition Remission Program Division of Student Financial Aid									
		ent Center South							
402 West Washington Street, Room W462									
Indianapolis, IN 46204									
Incomplete or faxed applications will not be accepted and will be returned.									
TO BE COMPLETED BY THE STATE STUDENT ASSISTANCE COMMISSION OF INDIANA									
				Denied:					
Approved:		see attached explanation.	Please see attached explanation.						
Printed name		Signature		Date (mm/dd/yyyy)					