

# ILLINOIS STATE TUITION WAIVER APPLICATION (ISTW)

(For Illinois State Residents Only)

**PRIVACY ACT STATEMENT:** STATUATORY AUTHORITY is 10-USC-210Z. **PRINCIPLE PURPOSE** is to obtain identification and educational data for processing AFROTC state tuition waiver applications. **ROUTINE USES** are to collect basic information and identify potential applicants. **DISCLOSURE** is voluntary, but omission of requested data can impede or terminate further enrollment/application processing. Information provided will be held in confidence and only released to the Air Force or schools directly involved in the processing of the application.

## Part I. Personal Information

1. Name (Last, First, Middle Initial):  
\_\_\_\_\_
2. Address (Street, City, State, Zip) and Phone #:  
\_\_\_\_\_  
\_\_\_\_\_  
Phone #: \_\_\_\_\_
3. Permanent Address (If different than #2):  
\_\_\_\_\_  
\_\_\_\_\_
4. Are Currently Married? \_\_\_\_\_ Are you a single parent? \_\_\_\_\_
5. Are you a US Citizen (circle one)? YES / NO
6. Social Security Number: \_\_\_\_\_
7. Previous experience in Active, Reserve, ROTC, JROTC, CAP?  
\_\_\_\_\_
8. Height: \_\_\_\_\_ Weight: \_\_\_\_\_

## Part II. Academic Information

### For High School Students Only

- H.S. Attending: \_\_\_\_\_
- GPA: \_\_\_\_\_ Grad Date: \_\_\_\_\_
- ACT Score: \_\_\_\_\_ SAT Score: \_\_\_\_\_
- College of Choice: \_\_\_\_\_
- Major I plan to seek: \_\_\_\_\_

### For Current College Students Only

- College Attending: \_\_\_\_\_
- Currently: Fresh Soph Junior Senior
- Academic Major: \_\_\_\_\_
- GPA: \_\_\_\_\_ Grad Date: \_\_\_\_\_

## Part III. Extracurricular Activities

1. List all club and student body activities:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. List all sports activities you have participated in:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. List leadership positions held in student body and sports activities:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. On a scale of 1-10 (10 being highest), rate your physical fitness level: \_\_\_\_\_
5. List any other information you wish the board to consider:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Part IV. Applicant Acknowledgement

Please consider me for an AFROTC Illinois State Tuition Waiver. I understand to have my tuition waived at SIUC, JALC, SIC, SCC  
I must:

- (a) Be an Illinois resident
- (b) Be enrolled as a full time student at one of the state schools listed above
- (c) Be enrolled and actively participate in the AFROTC program at Detachment 205 with the intent to complete the program and commission as an officer in the United States Air Force
- (d) Have a cum high school GPA of 2.5 on a 4.0 scale or college GPA of 2.0 (Transcript MUST be submitted)
- (e) Complete both AFROTC Drug Use Checklist and Certification of Involvements with Civil, Military, or School Authorities

Note: If you receive an ISTW and begin classes with AFROTC, there will a Statement of Understanding that you will have to sign which further details the requirements for you to maintain your scholarship.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

**AFROTC Det 205 Cross Into the Blue!**

Mail to: AFROTC Det 205/UAO  
Detachment 205, Southern Illinois University- Carbondale  
807 S. University Ave (Mail Code 6718)  
Carbondale, IL 62901  
Or Fax to: (618) 453-1665 ATTN: UAO, Phone (618) 453-2481