

CHAPTER 3
TUITION REIMBURSEMENT - SURVIVOR ENTITLEMENT

3-1. **GENERAL.** If a member of the Minnesota National Guard is killed while performing military duty, his or her surviving spouse and/or surviving dependents (to include biological children of the deceased born within 10 months after the member's death), become eligible for the State of Minnesota funded post-secondary tuition reimbursement entitlement.

3-2. **SCOPE.** This entitlement covers accident-related deaths that occur within the scope of a service member's assigned duties, while in a federal duty status or on state active service, as defined in Minnesota Statutes section 190.05. This entitlement also covers accidental death that occurs while directly between the service member's home of record and place of duty for drill attendance. Deaths from natural causes or suicide are excluded from this benefit.

3-3. **ELIGIBILITY.**

- a. The surviving spouse is eligible regardless of remarriage.
- b. Surviving dependents are eligible until their 24th birthday.
- c. Surviving spouse and eligible dependent(s) will remain eligible even if they move out of state and become a non-Minnesota resident.

3-4. **PROCEDURES.**

- a. The Office of the Adjutant General will issue a Letter of Eligibility that outlines the Tuition Reimbursement entitlement. The Education Service Office (ESO) will forward the letter to the surviving spouse; and if no spouse, to the oldest adult dependent; or the guardian of minor children. The letter will indicate by name, date of birth, social security number, and the dependents eligible for tuition reimbursement.
- b. The Minnesota Army National Guard Military Education Services Office will manage this benefit program and maintain files on all Letters of Eligibility issued.

3-5. **GUIDELINES.**

a. **RATE OF REIMBURSEMENT.** The Minnesota National Guard will reimburse up to **100%** of the tuition charged for eligible coursework (undergraduate and graduate) at accredited post-secondary institutions, not to exceed 100% of the University of Minnesota Twin Cities campus, undergraduate tuition rate of **\$326.92 per credit with a maximum of \$4250.00 per term for school year 2009-2010 (rates will change).**

b. **COURSE REQUIREMENTS.**

- (1) Reimbursement is authorized for:
 - (a) Courses taken at an accredited post secondary educational institution or certification program approved for veteran's benefits.
 - (b) Courses eligible for placement on a transcript from the post secondary educational institution.
 - (c) Undergraduate courses completed with a grade of "**C**" or higher.
 - (d) Graduate courses completed with a grade of "**B**" or higher.
- (2) Reimbursement is not authorized for:
 - (a) Courses that were not completed.

(b) Courses that earn Continuing Education Units (CEUs).

(c) Activity fees, computer user fees, registration fees, books, room and board expenses, and other school-related fees.

(3) If a student receives a tuition waiver (no tuition paid or the fee statement indicates no tuition charges), reimbursement is not authorized. For example, high school students who attempt post-secondary coursework, where the courses are paid for by the high school, school district, or state, are not eligible to receive reimbursement for this coursework.

c. **LIFETIME MAXIMUM BENEFIT.** The maximum lifetime benefit under the State Tuition Reimbursement Program is funding for **208 quarter/144 semester credits**.

d. **ADMINISTRATION.**

(1) Tuition reimbursement is paid upon successful completion of coursework.

(2) The student must request tuition reimbursement **no later than 90** days from the last official day of the term.

(3) The student's fee statement is the source document for determining the amount of reimbursement. If the fee statement does not clearly show the amount of tuition charged, the student must obtain a letter from the institution that states the amount of tuition charged and a point of contact at the institution.

3-6. **PAYMENT PROCEDURES.**

a. "Memorandum of Understanding"

(1) This memorandum specifically outlines the student's responsibility for obtaining reimbursement under the Minnesota State Tuition Reimbursement Program.

(2) Annually, the student must carefully read, sign and submit the MOU to ESO.

b. Annual Obligation Request.

(1) Complete the MN-NG **Form 621-5-1-O** (Annual Obligation Request-Survivor Benefit) Submit form to the ESO prior to beginning classes.

(2) The annual obligation is an estimate of tuition cost for each term during the school year. The actual amount of reimbursement is dependent on the cost of tuition and the number of credits completed. The current school year is Summer Session II 2009 through Summer Session I 2010.

c. Request for Reimbursement.

(1) The student must submit the following forms and supporting documents to the ESO within 90 days after the last official day of the term.

(a) Payment Request, MN-NG Form 621-5-2-P

(b) Grade Report. Reports downloaded from the internet are acceptable.

(c) Fee statement that clearly shows the amount of tuition charged. If the fee statement does not clearly show the amount of tuition charged, the student must obtain a letter from the institution that states the amount of tuition charged and include a point of contact at the institution.

(2) By signing this application, the student is verifying that all information is true and correct. It also authorizes the ESO to contact the school to verify course grades.

2-9. INCOMPLETE COURSEWORK AND LATE REQUESTS.

a. Incomplete Coursework.

(1) If the student has an incomplete, he/she should request payment for completed classes. Once the student has finished the incomplete class(es), he/she should request payment for those courses (specify which classes submitting for). Student must submit reimbursement requests for **completed** courses **no later than 90** days from the last official day of the term; the ESO will reimburse for these courses provided annual obligation was submitted and funds are available.

(a) In the comments block, annotate the classes that are incomplete and the expected completion date.

(b) The student must submit request for reimbursement, along with fee statement and grades to the ESO.

(c) Retain a copy of this **Request for Payment** form and paperwork to submit upon completion of **incomplete** coursework.

(2) Upon completion of the coursework, complete a new MN-NG Form 621-5-2-P, requesting reimbursement for only the courses that were originally incomplete but are now complete. Provide this request along with a grade report showing satisfactory completion and a copy of the original request to the ESO.

b. Late Requests for Tuition Reimbursement.

(a) If a student misses the 90-day suspense, **the obligation will be terminated. No reimbursement request will be approved for that term. (For extenuating circumstances, the student must submit an exception to policy in accordance with paragraph 1-9.)**

3-7. TERMINATION.

a. Any student who submits a falsified grade report, transcript, or fee statement that does not accurately reflect final course grades, or who attempts to receive funds to which he/she is not due, will be terminated from this program for a minimum of one year from the date of detection.

b. The ESO will terminate the entitlement for the surviving dependents on the dependent's 24th birthday. The dependent will be paid for the term during which he/she turns 24.

c. The ESO will terminate the benefit for the surviving spouse in the event of remarriage. The spouse will be paid for the term during which he/she remarries.

**MINNESOTA NATIONAL GUARD
SURVIVOR STATE TUITION REIMBURSEMENT PROGRAM
MEMORANDUM OF UNDERSTANDING FALL 09-SUMMER 10**

A-1. ACKNOWLEDGEMENT STATEMENT.

I, _____(Full Name), certify that I have read this memorandum prior to signing and fully understand the policies and procedures of the Minnesota State Tuition Reimbursement Program as described in Minnesota National Guard Circular 621-5-1 and this MOU.

A-2. INTRODUCTION.

a. The State of Minnesota sponsors the Tuition Reimbursement Program. The state legislature appropriates funds for this program biennially. If in the future, the state does not fund the Tuition Reimbursement Program, I understand that neither the State of Minnesota nor the Minnesota National Guard is obligated to continue the benefit.

b. I also understand that if I do not meet all the criteria outlined in Minnesota National Guard Circular 621-5-1, dated 1 Jul 09, I may jeopardize my entitlement to receive reimbursement.

c. I understand that the State Tuition reimbursement Program will reimburse up to 100% of tuition, not to exceed 100% of the University of Minnesota Twin Cities campus, undergraduate tuition rate. **That rate is currently \$305.77 per credit, with a maximum of \$3975.00 per term for school year 2009-2010.**

d. I understand that reimbursement is not authorized for activity fees, computer user fees, registration fees, books, room and board expenses, and other school-related fees.

A-3. COURSE REQUIREMENTS

(1) Reimbursement is authorized for:

(a) Courses taken at an accredited post secondary educational institution or certification program approved for veteran's benefits.

(b) Courses eligible for placement on a transcript from the post secondary educational institution.

(c) Undergraduate courses completed with a grade of "C" or higher.

(d) Graduate courses completed with a grade of "B" or higher.

(2) Reimbursement is not authorized for:

(a) Courses that were not completed.

(b) Courses that earn Continuing Education Units (CEUs).

(c) Activity fees, computer user fees, registration fees, books, room and board expenses, and other school-related fees.

(3) If I receive a tuition waiver (no tuition paid or the fee statement indicates no tuition charges), reimbursement is not authorized. For example, high school students who attempt post-secondary coursework, where the courses are paid for by the high school, school district, or state, are not eligible to receive reimbursement for this coursework.

A-4. REIMBURSEMENT PROCEDURES.

a. Memorandum of Understanding. Annually, I will carefully read, sign and submit a MOU to The Education Service Office (ESO)

b. Annual Obligation Request.

(1) I must complete the MN-NG Form 621-5-1-O, (Annual Obligation Request) and submit it to the ESO prior to beginning classes.

(2) I understand that the annual obligation is an estimate of tuition cost for each term during the school year. The actual amount of reimbursement is dependent on the school, credits and terms attended. The school year is Summer Session II 2009 through Summer Session I 2010.

(3) I understand that failure to obligate may result in my not being reimbursed.

c. Request for Reimbursement Payment:

(1) I understand that I must submit the following forms and supporting documents to the ESO within 90 days after the last official day of the term. Students enrolled in accelerated programs, where several terms are completed during the course of a normal semester should submit their requests in groups that correspond with a normal semester. Once each for Fall, Winter, Spring, Summer and Summer 2.

(a) Payment Request (Form 621-5-2-P).

(b) Grade Report. Grades from the internet are acceptable.

(c) Fee statement that clearly shows the amount of tuition charged. If the fee statement does not clearly show the amount of tuition charged, I will obtain a letter from the institution that states the amount of tuition charged and lists a point of contact at the institution.

(2) I understand that my signature on the MN-NG Form 621-5-2-P will verify that all information is true and correct. My signature also authorizes the ESO to contact the school to verify course grades.

(3) I understand that I must submit my request for tuition reimbursement within 90 days after the last official day of the course.

A-5 INCOMPLETE COURSEWORK AND LATE REQUESTS.

a. Incomplete Coursework.

(1) I understand that if I have an incomplete, I should request payment for completed classes. Once I have finished the incomplete class(es), I should request payment for those courses (specify which classes submitting for). I must submit reimbursement requests for **completed** courses **no later than 90** days from the last official day of the term; the ESO will reimburse for these courses provided annual obligation was submitted and funds are available.

(a) In the comments block, annotate the classes that are incomplete and the expected completion date.

(b) I must submit request for reimbursement, along with fee statement and grades to the unit.

(c) I must retain a copy of this **Request for Payment** form and paperwork to submit upon completion of **incomplete** coursework.

(2) I understand that upon completion of the coursework, complete a new MN-NG Form 621-5-2-P, requesting reimbursement for only the courses that were originally incomplete but are now complete. Provide this request along with a grade report showing satisfactory completion and a copy of the original request to the ESO.

b. Late Requests for Tuition Reimbursement.

(1) If I miss the 90-day suspense, the obligation will be terminated. No reimbursement request will be approved for that term. (For extenuating circumstances, the student must submit an exception to policy in writing. The request must clearly explain the circumstances that may merit an exception to policy

A-5 **TERMINATION.** The submission of a falsified grade report, transcript or fee statement, or an attempt to receive funds to which a member is not due will result in the termination from the State Tuition Reimbursement Program for a minimum of one year from the date of detection

A-6. **OTHER STUDENT RESPONSIBILITIES**

a. I understand that it is my responsibility to ensure that my application for the Minnesota State Tuition Reimbursement Program is submitted within the guidelines indicated herein and in accordance with MN NG Cir 621-5-1.

b. I further understand that any attempt to submit falsified documents will result in my termination from the State Tuition Reimbursement Program for a MINIMUM of one year from the date of detection.

c. I fully understand the directives outlined herein and in MN-NG CIR 621-5-1 and my responsibilities for participation in the Minnesota state tuition reimbursement program.

Signature of Service Member

Date

Signature of Unit Rep.

Date

**MINNESOTA NATIONAL GUARD
STATE TUITION REIMBURSEMENT PROGRAM
ANNUAL SURVIVOR OBLIGATION REQUEST**

-----DATA REQUIRED BY THE PRIVACY ACT OF 1974-----

AUTHORITY: 37 USC 308b title 37, USC and section 552a, title 5, USC

PRINCIPLE PURPOSE: To explain obligation and participation requirements for State Reimbursement Program and to ensure that your agreement to these conditions is a matter of record.

ROUTINE USES: To confirm requirements of obligation and participation requirements for the State Reimbursement Program, occasionally as a basis for suspension, termination and recoupment if requirements are not met.

DISCLOSURE: Disclosure of your SSN is voluntary; however, if not provided, you will not be eligible for the State Reenlistment Bonus Program.

Name: _____ SSN: _____ Rank: _____
(Last, First, MI)

Current Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Education Level: _____

Course Type: Vo/Tech ____ Under Grad ____ Graduate ____ Dist Learning ____ Independent Study ____

School Year: _____ School Attending: _____

Anticipated credits for school year: Fall ____ Winter ____ Spring ____ Summer1 ____ Summer2 ____

Remarks:

SIGNATURE

DATE

**MINNESOTA NATIONAL GUARD
STATE TUITION REIMBURSEMENT PROGRAM
SURVIVOR PAYMENT REQUEST**

-----DATA REQUIRED BY THE PRIVACY ACT OF 1974-----

AUTHORITY: 37 USC 308b title 37, USC and section 552a, title 5, USC

PRINCIPLE PURPOSE: To explain obligation and participation requirements for State Reimbursement Program and to ensure that your agreement to these conditions is a matter of record.

ROUTINE USES: To confirm requirements of obligation and participation requirements for the State Reimbursement Program, occasionally as a basis for suspension, termination and recoupment if requirements are not met.

DISCLOSURE: Disclosure of your SSN is voluntary; however, if not provided, you will not be eligible for the State Reenlistment Bonus Program.

INSTRUCTIONS: Complete this form, attach grade report and a fee statement and mail to: The Department of Military Affairs, Veteran Service Building, 20 West 12th Street, Saint Paul, MN 55155. The form must arrive at the ESO within 90 days after the last official day of the term.

Name: _____ SSN: _____

Current Mailing Address: _____ City: _____ State: _____

Zip Code: _____ Email Address: _____ Telephone: _____

Course Type: Undergraduate Study _____ Graduate Study _____ Dist Learning _____ Independent Study _____

School Year _____ School Attended _____

TERM: Fall _____ Winter _____ Spring _____ Summer _____ Summer2 _____

Total Number of Credits Attempted: _____ Credits Eligible for Reimbursement: _____ Tuition Charged: \$ _____

Note: Fee statement or letter from the school must reflect the actual amount of tuition charged.

Remarks:

I verify that the address and information on this form is correct. The documentation I have submitted, herewith, is true and correct.

Signature

Date