



Nebraska First Responder Recruitment & Retention Act Dependent Tuition Waiver Application and Certification of Verification

The Nebraska First Responder Recruitment and Retention Act provides a waiver of 100% of the resident tuition charges of law enforcement officers and/or their eligible dependent(s) for a period of up to five years. A law enforcement officer, for the purposes of the program, is defined as any person who is responsible for the prevention of detection of crime or the enforcement of the penal, traffic or highway laws of the State of Nebraska or any political subdivision of the state for more than 100 hours per year and who is authorized by law to make arrests.

In order to establish eligibility for the waiver, an applicant must be enrolled to Metropolitan Community College and must complete and sign this application form annually. Additionally, the parent's superior officer at the law enforcement agency where the parent is employed must sign this certificate attesting to the parent's satisfactory performance as a law enforcement officer.

Applicant/Student Information:

Student Name _____ MCC ID _____

Telephone Number _____ Email Address _____

Parent Information:

Parent Name _____

Parent Telephone Number _____ Email Address _____

By signing this document, I affirm that:

1. I am a law enforcement officer responsible for the presentation or detection of crime or the enforcement of the penal, traffic or highway laws of the State of Nebraska or any political subdivision of the state for more than 100 hours per year and I am authorized to make arrests
2. I am currently employed by a municipality, sheriff's office, or the Nebraska State Patrol as a law enforcement officer.
3. My dependent is pursuing an undergraduate degree program.

Parent Signature _____ Date _____



Certificate of Verification of Satisfactory Performance (to be completed by a superior officer)

Supervising Officer Name and Rank _____

Law Enforcement Agency _____

Address _____

Telephone Number _____ Email Address _____

I am the supervising officer for the individual listed above and by my signature I attest the officer has maintained and continues to maintain satisfactory performance as a law enforcement officer with the law enforcement agency listed above.

Signature of Supervising Officer _____ Date _____

Please return your completed application to the MCC Financial Aid Office by fax to 402-933-8437, USPS mail at PO BOX 3777, Omaha, NE 68103-0777, or in person at a MCC Financial Aid Office.