

## ARNG TUITION ASSISTANCE (TA) STATEMENT OF UNDERSTANDING

**Your initials are required for each line**

1. \_\_\_\_\_ I understand approval of this request is **NOT** automatic.
2. \_\_\_\_\_ I understand TA is authorized on a course-by-course basis and only for courses required for my degree. I understand TA will **NOT** be used to repeat any courses or equivalent regardless of the funding source of the original course(s).
3. \_\_\_\_\_ I understand **ALL** TA request are processed on a first-come, first-served basis. When funding is limited, I understand priority will be given to those working on undergraduate degrees.
4. \_\_\_\_\_ I understand there is no guarantee of availability of TA funds, particularly toward the end of July and August of any fiscal year. **NO TA REQUESTS WILL BE PROCESSED AFTER 29 AUGUST.**
5. \_\_\_\_\_ **I understand future TA requests will not be approved if the ESO does not have a status/grade report. Satisfactory progress reports signed by the instructor are acceptable for on-going courses. I also understand, I must provide the grade report within 30 days after the completion of the course.**
6. \_\_\_\_\_ I understand recoupment action will be automatically initiated 60 days after the end date of the course for any courses, if I fail to complete for reason within my control. Courses not completed for reasons beyond my control, I understand I must submit a letter from my Commander stating the reason for non-completion. I also understand any courses for which a grade of Incomplete is issued, must be completed within 120 days, regardless of institutional policy.
7. \_\_\_\_\_ I understand approval of any adjustments to the request for tuition assistance must be obtained from the ESO and **ANY ALTERATION TO THIS FORM ARE PROHIBITED.**
8. \_\_\_\_\_ I understand approved TA requests for course(s) in which I decide not to enroll must be returned to the ESO immediately.
9. \_\_\_\_\_ I certify that I am **NOT FLAGGED** under provisions of Army Regulation 600-8-2 and that my anticipated duties will permit completion of the course(s).
10. \_\_\_\_\_ I certify I **AM NOT ACTIVE GUARD RESERVE (AGR) TITLE10, 2007.** I certify I will complete my term of enlistment or will reimburse the government (Title 10, USC 2005).
11. \_\_\_\_\_ I understand all required forms and a completed DA Form 2171 must be received by the ESO no later than 15 days prior to class start date. I certify I have read, understand, and will comply with the NGB and ESO policies and procedures, and pertinent portions of AF 621-5.

### **SOLDIER CERTIFICATION**

---

Last Name, First Name (Rank)

---

Signature and Date