

Privacy Act Statement

Authority: The solicitation of personal information for this form is authorized under Title 10 USC 2007.

Purpose: This form is used to request a waiver of Army tuition assistance recoupment in accordance with AR 621-5.

Routine Uses: Information from this form will be viewed by Army Continuing Education Services personnel and may be disclosed to members of the Department of Defense or educational institutions who have a need for it in the performance of their duties.

Disclosures: Voluntary; however, failure to provide information may result in a delay or error in processing the request for waiver of Army tuition assistance recoupment.

Request for TA Recoupment Waiver – Withdrawal for Military (WM) Reasons

1. Purpose: To request waiver of Tuition Assistance (TA) recoupment for non-completion or failure of a TA-funded class due to **UNANTICIPATED/UNEXPECTED** reasons, such as emergency leave/reassignment, natural or man-made disaster, illness/hospitalization, or unforeseen military mission.

2. Procedure: IAW AR 621-5, this form must be completed, endorsed by the first commander in the Soldier's chain of command exercising UCMJ authority, uploaded to the Soldier's GoArmyEd eFile, and processed by the Education Services Officer (ESO) no later than three years from the end date of the TA-funded class. Documentation substantiating the reason for a waiver request (e.g., military orders or proof of hospitalization) must be attached to this form. The ESO is the approval authority for TA recoupment waiver requests.

3. Soldier requesting a TA recoupment waiver:

Soldier's Signature

Last Name	First Name	Rank	GoArmyEd User ID	Date

4. Course(s) for which TA recoupment waiver is requested:

School Name	Course Number	Course Title	Start Date	End Date	TA Cost

5. Justification to support approval of TA recoupment waiver request (must include relevant details and start/end dates of event; additional sheets can be added, if necessary):

6. Description of substantiating documentation submitted (required):

7. Commander's recommendation for approval:

Yes No

Commander's Printed Name/Rank/Branch		Date
Unit	Phone	
Email		

Commander's Signature