



FLORIDA STATE UNIVERSITY

Certification of Military Status for Transcript Waiver

Name: _____ FSUID/EMPLID: _____

Instructions: To verify your military status, complete this form and sign the applicable below statement before a notary public.

SELECT YOUR STATUS:

Active Duty Military Active Duty Military Dependent (spouse or child)
 Veteran (Honorably Discharged) Veteran Dependent (spouse or child)

1. Active Duty Member/Dependent

I, _____ hereby verify that I am active duty military or an active duty military spouse/dependent.

Signature: _____

2. Veteran/Veteran Dependent

I, _____ hereby verify that I am a military veteran or I am a military veteran spouse/dependent.

Signature: _____

State of _____

County of _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____,
by _____.

Notary Signature and Seal

Personally known _____ OR Produced identification _____

Type of identification produced: _____