

**First Responder Recruitment and Retention Act Legal Dependent  
Tuition Waiver Recipient Notification**

**FORM  
FRVA-N**

Legal Dependent Tuition Waiver Recipient Name and Address

First Name and Middle Initial

Last Name

Current Mailing Address (Number and Street or PO Box)

City

State

ZIP Code

Social Security Number

I am a legal dependent who is a tuition waiver recipient under the First Responder Recruitment and Retention Act (Act) and pursuant to Neb. Rev. Stat. § 85-2605 of the Act, I am making the required notification to the Nebraska Department of Revenue (DOR) by completing and submitting the Form FRVA-N.

Please check the applicable box:

I have completed a two-year degree at a community college and I do not intend to pursue an undergraduate degree or additional two-year degree using tuition waivers pursuant to the Act.

I do not intend to use additional tuition waivers pursuant to the Act.

**If you are no longer using a tuition waiver because you completed an undergraduate degree at a state college or state university you do not need to file this Notice.**

I authorize DOR to release information regarding this notification to any public postsecondary educational institution(s) that granted me a tuition waiver under the Act.

**sign  
here** ▶

Signature of Legal Dependent Tuition Waiver Recipient

Date

Phone Number

Email Address