



## ELIGIBILITY GUIDELINES FOR THE KANSAS HERO'S SCHOLARSHIP – PUBLIC SAFETY OFFICERS

### **WHAT BENEFITS ARE AVAILABLE?**

The Kansas Hero's Scholarship Act (K.S.A. 75-4364) establishes a waiver which provides an opportunity for eligible dependents and spouses of certain deceased/disabled public safety officers to attend an eligible public Kansas postsecondary educational institution without payment of tuition and required fees. The student will be responsible for all other charges associated with the student's academic program. This waiver is only available for undergraduate coursework.

### **APPLICATION DEADLINES:**

**Fall Semester: October 1**

**Spring Semester: March 1**

**Summer Semester: June 1**

This scholarship is awarded on a first come, first served basis and funding is limited. Applicants are encouraged to submit the completed application and required documentation as soon as they know which eligible school they will be attending. Waivers are guaranteed only up to the amount of funding available each year.

### **WHO IS ELIGIBLE TO APPLY?**

Dependents or spouses of a **Kansas** public safety officer who:

- Died as a result of injury sustained while performing duties as a Kansas public safety officer; **OR**
- Was injured or disabled while performing duties as a Kansas public safety officer **and** is incapable of performing duties for the position being performed at the time the injury/disability was sustained and any position that is at or above the pay level of that position.

**Please review the "Required Documentation" section on page 2 and "Definitions" section on page 3 to ensure you meet the eligibility requirements and provide the relevant documentation. Applicant must submit documentation showing all requirements are met by the applicant and public safety officer.**

### **WHERE CAN ELIGIBLE STUDENTS RECEIVE THE HERO'S SCHOLARSHIP?**

**Public Kansas postsecondary educational institutions**, which includes public technical colleges, public community colleges, public state universities, and Washburn. This scholarship is not available for attendance at private or independent institutions. This scholarship is not available at out-of-state institutions.

### **LENGTH OF ELIGIBILITY**

Each eligible dependent or spouse may qualify for tuition and fee waivers for a total of ten (10) semesters of **undergraduate instruction**. Summer semesters are eligible for funding and count as 1/3 of a semester of eligibility. Eligibility will begin during the first semester following the application. If currently enrolled when applying, eligibility will start during the current semester for which an applicant met the application deadline. Eligibility is not retroactive – we cannot provide this benefit for semesters that have already passed.

***Please review the required documentation listed on the next page.***

## REQUIRED DOCUMENTATION

The following documentation must be submitted along with the application; applications without complete documentation will not be considered. The application is on page 4.

### 1. **Proof of service-connected death or disability:**

#### **Service-Connected Death:**

- A death certificate citing the death of the public safety officer; AND
- Additional conclusive documentation should be provided showing the death was a result of performing duties as Kansas public safety officer. Potential documentation could include an official letter from the department in which the public safety officer was affiliated, medical documentation, etc. Documentation should be conclusive.

#### **Service-connected Disability:**

- Official documentation addressing that the injury or disability was sustained while performing duties as a Kansas public safety officer, and how such injury or disability prevents the individual from performing the duties at or above the pay level of the position the person held at the time of injury or disability. Potential documentation could include an official letter from the department in which the public safety officer was affiliated, medical documentation, etc. Documentation should be conclusive.

### 2. **Proof of relationship between applicant and public safety officer:**

**Spouse:** A marriage certificate providing evidence of marriage between the applicant and the public safety officer.

**Dependent:** A birth certificate or a certificate of adoption showing the relationship between the applicant and the public safety officer. In the case of a stepparent who has not legally adopted the applicant, acceptable documentation would include a marriage certificate between the public safety officer and the biological/adoptive parent, as well as a birth certificate or adoption certificate with the biological/adoptive parent's information listed. In the case of dependents who are neither children nor stepchildren of the servicemember, please contact us for guidance on acceptable documentation.

**Questions? Email: [scholars@ksbor.org](mailto:scholars@ksbor.org) Phone: 785-430-4300**

### **DEFINITIONS (in alphabetical order):**

***Dependent:*** Includes birth child, adopted child, stepchild, or any other child who is dependent in whole or in part to such individual by marriage or consanguinity.

***Injured or disabled:*** An eligible injured or disabled individual has been rendered incapable of performing duties of the following:

- The position being performed at the time the injury/disability was sustained; and
- Any position that is at or above the pay level of the position the person was in at the time the injury or disability was sustained, if the person is a paid employee.

For the purposes of this definition, an injury or disability is any lesion or change in the physical structure of the body causing damage or harm thereto that is not transitory or minor AND occurred only by accident, intentional act of violence, or repetitive trauma.

***Public Safety Officer:*** A law enforcement officer, a firefighter, an emergency medical service provider, or a public safety employee who served or is serving in the state of Kansas.

- Law Enforcement Officer: vested by law with a duty to maintain public order or to make arrests for violation of the laws of the state of Kansas or ordinances of any municipality thereof; or with a duty to maintain or assert custody or supervision over persons accused/convicted of a crime. Includes wardens, superintendents, directors, security personnel, officers, and employees of adult and juvenile correctional institutions, jails or other institutions/facilities for the detention of persons accused/convicted of a crime.
- Firefighter: A person employed by any city, county, township, or other political subdivision of the state of Kansas and who is assigned to the fire department thereof and engaged in the fighting/extinguishment of fires. This can also include volunteer members of any fire district, department, or fire company in the state of Kansas.
- Emergency Medical Service Provider: An emergency medical responder, advanced emergency medical technician, emergency medical technician or paramedic certified by the Kansas emergency medical services board.
- Public Safety Employee: Any employee of a law enforcement office, sheriff's department, municipal fire department, volunteer/non-volunteer fire protection association, emergency medical services provider or correctional institution of the Kansas department of corrections.

***Required Fees:*** Charges required by an institution to be paid by every student as a condition of enrollment. "Fees" do not include all other charges associated with the student's academic program or living costs.

***Spouse:*** A person married to the public safety officer, or who was married to the public safety officer at the time of the public safety officer's death and who has not remarried.



## APPLICATION FOR THE KANSAS HERO'S SCHOLARSHIP FOR DEPENDENTS AND SPOUSES OF KANSAS PUBLIC SAFETY OFFICERS

Applicants for the Kansas Hero's Scholarship must complete and return this application form and all required supporting documentation by creating an account online at <https://sfa.kansasregents.org/> and using the "Upload Documents" button to submit. Alternatively, you may mail completed materials to:  
*Kansas Board of Regents, 1000 SW Jackson, Suite 520, Topeka, KS 66612.*

Waivers will be provided if a student meets eligibility criteria and funding is available. Please read the instructions and definitions on the cover page of this form to assist in determining whether you will be eligible for this benefit. Please provide all relevant required documentation in addition to submitting this form. Applications that do not include required documentation will be denied.

**APPLICATION DEADLINES: Fall Semester: October 1; Spring Semester: March 1; Summer Semester: June 1**

\_\_\_\_\_  
Name of Applicant (eligible dependent or spouse) Student ID, if known

\_\_\_\_\_  
Street City State Zip Code

\_\_\_\_\_  
Applicant Email address Applicant Phone Number

\_\_\_\_\_  
Public Kansas Educational Institution the Applicant will be Attending (DO NOT LEAVE THIS BLANK)

**Enrollment Start Date:** \_\_\_\_\_ **Anticipated Graduation:** \_\_\_\_\_  
MONTH/YEAR MONTH/YEAR

**Select start term for Hero's Scholarship Waiver:**  Fall Semester  Spring Semester  Summer

**Applicant is a dependent/spouse of a (select one):**

- Law Enforcement Officer/ Police Officer  Firefighter  
 Emergency Medical Services Provider  Other Public Safety Employee

**Applicant's Relationship to Public Safety Officer (DOCUMENTATION REQUIRED):**

- Spouse  Biological child  Adopted child  Stepchild  Other dependent

**Name of Public Safety Officer:** \_\_\_\_\_

**Which Kansas department/agency/office did the Public safety officer work for?**

\_\_\_\_\_

**Cause of Death, Injury or Disability of Public Safety Officer (DOCUMENTATION REQUIRED):**

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**Public Safety Officer is (SELECT ONE – DOCUMENTATION REQUIRED):**

Deceased    **Date of Death** \_\_\_\_\_  
MM/DD/YYYY

**Was the death a result of service as a Kansas Public Safety Officer?**     Yes     No

Disabled    **Date injury or disability occurred** \_\_\_\_\_  
MM/DD/YYYY

**Because of the injury or disability, was the Kansas public safety officer rendered incapable of performing duties of the following:**

- I.    The position being performed at the time the injury or disability was sustained:     Yes     No
  
- II.   Any position that is at or above the pay level of the position the person was in at the time the injury or disability was sustained:     Yes     No

By signing this application form, I declare under penalty of perjury under the laws of the state of Kansas that the above is true and correct to the best of my knowledge. I understand that a false statement may disqualify me for benefits.

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**Student-Applicant Signature**

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**Date**

To submit this application, please create an account online at <https://sfa.kansasregents.org/> and submit completed form and all required documentation using the "Upload Documents" button at the top of the Scholarships page.

Alternatively, you may mail to: Kansas Board of Regents, 1000 SW Jackson, Suite 520, Topeka, KS 66612

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