



TEXAS PREPAID HIGHER
EDUCATION TUITION BOARD

P.O. Box 13407
Austin, Texas 78711-3407

1.800.445.GRAD (4723), Option 2
FAX: 512.475.0081
texas.tomorrow@cpa.texas.gov
www.tgtp.org

Dual Enrollment Request Form

Please complete the following form in order to request a change to the beneficiary's Payout Date for the contract indicated below due to dual enrollment. The signatures of both Purchasers (if applicable) and a New Payout Date must be on this form in order to complete your request. By signing the form, you acknowledge that you understand that the New Payout Date changes the 10-Year automatic termination date addressed in the statute, rules and your contract. The original termination date was based on the beneficiary's Projected High School Graduation Date at the time you purchased your contract. The termination date will now be based on the New Payout Date requested below. Refunds on terminated contracts do not include earnings. **The contract must be paid in full, including any outstanding fees, prior to use.** This form can be returned to P.O. Box 13407, Austin, TX 78711, or sent via FAX to 512-475-0081. Thank you for your participation in the *Texas Guaranteed Tuition Plan*.

Purchaser Name		Joint Purchaser (if applicable)	
Current Beneficiary Name		Prepaid Tuition Contract Number	
Current Projected High School Graduation Date		New Payout Date (REQUIRED) May (Fill in year) Year 20 _____	
NOTE: The New Payout Date must be May of the year preceding the start of dual enrollment. Example: If dual enrollment begins September 2015 and the current projected high school graduation date is May 2016, then New Payout Date must be May 2015.			
College or University Attending		College or University Contact Name and Phone Number	

Certification of Purchasers

<p>I, _____, the undersigned, acknowledge that by requesting a New Payout Date, the Prepaid Contract will expire on the 10th anniversary of the New Payout Date indicated above, instead of the original Projected High School Graduation Date on the contract.</p> <p>sign here _____ Signature of Current Purchaser Date</p> <p>_____ Printed Name of Current Purchaser</p>	
<p>I, _____, the undersigned, acknowledge that by requesting a New Payout Date, the Prepaid Contract will expire on the 10th anniversary of the New Payout Date indicated above, instead of the original Projected High School Graduation Date on the contract.</p> <p>sign here _____ Signature of Current Joint Purchaser (if applicable) Date</p> <p>_____ Printed Name of Current Joint Purchaser (if applicable)</p>	

FEDERAL PRIVACY ACT STATEMENT – Disclosure of your Social Security number (SSN) is required and authorized by law. Authority: 42 U.S.C. Sec. 405(c)(2) (C)(i); Internal Revenue Code of 1986, sections 529(d) and 6109(a). The number will be used to identify the prepaid tuition contract purchaser and beneficiary when the Texas Guaranteed Tuition Plan pays benefits to the selected college or university.

STATE INFORMATION NOTICE UNDER CHAPTER 559, GOVERNMENT CODE – With few exceptions, you are entitled on request to be informed about the information that we collect about you. Under Sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Government Code, you are entitled to have us correct any information about you that is in our possession and that is incorrect. If at any time you are concerned that your personal information held by us is incorrect and you are unsure as to how to correct or update it, please contact us at 800-445-GRAD (4723), option #2.