

APPENDIX F

CERTIFICATE OF ELIGIBILITY FOR STATEWIDE REMISSION FOR
HIGHER EDUCATION EMPLOYEES

Before completing this form, please read carefully the Board of Higher Education System-wide Tuition Remission Policy for Higher Education Employees to determine if you, your spouse or your dependent child is eligible for tuition remission benefits. After completing the form, you must have it signed by both your Department Head and the College's Director of Human Resources. You must then submit the form with your tuition bill to the College or University at which you, your spouse or your dependent child is enrolled.

EMPLOYEE'S NAME

EMPLOYEE'S COLLEGE

TITLE AND DEPARTMENT

UNION AFFILIATION

NAME OF INDIVIDUAL USING
TUITION REMISSION

RELATIONSHIP TO EMPLOYEE

_____ SELF

_____ SPOUSE

_____ DEPENDENT CHILD

_____ NON-DEPENDENT CHILD*

***State Colleges only**

SS# _____
INDIVIDUAL USING TUITION
REMISSION FORM

NAME OF COLLEGE/UNIVERSITY ATTENDING _____
SEMESTER: FALL ___ SPRING ___ SUMMER ___ INTERSESSION ___

ENROLLMENT STATUS: FULL TIME ___ PART TIME ___

EMPLOYMENT STATUS: FULL TIME ___ PART TIME ___

SIGNATURE OF EMPLOYEE

DATE

The individual named above is an employee of this College and meets the eligibility requirements for system-wide tuition remission.

SIGNATURE OF EMPLOYEE'S
DEPARTMENT HEAD

SIGNATURE OF DIRECTOR OF
HUMAN RESOURCES

DATE

DATE

This certificate is valid for 120 days after the date of signature by the Director of Human Resources. A new certificate must be completed for each semester of study. This certificate is not transferable.