Request for Tuition Waiver
(For Spouses & Dependents)

The Tuition Remission Policy & Procedure is on the Human Resources web page at:
http://www.loyno.edu/human.resources/policiesandprocedures/manual/4-18.html

PLEASE PRINT (Incomplete applications will be returned).

Employee's Name: _____ Date of Hire: _____

Employee SSN: _____ Department: _____Box #: _____Ext. #:_____

☐ Full-time Faculty ☐ Full-time Staff

Student's Name: _____ Student SSN: _____

☐ Employee's Spouse ☐ Employee's Dependent Child Dep. Child's DOB: _____

☐ Graduate-level only – Dependent receives scholarships (attach a copy of the scholarship award letter)

Courses requested are for the following semester (one application per semester, please):

Year: _____ ☐ Degree seeking ☐ Non-degree seeking
☐ Undergraduate ☐ Graduate ☐ Law
☐ Fall ☐ Spring ☐ Summer
Session: _____

STUDENT AGREEMENT:

I consent to the release of tuition remission information to the employee whose name appears above.

☐ Yes ☐ No

_____ _____
Student Signature Date

EMPLOYEE AGREEMENT:

I understand that the aforementioned eligible student dependent/spouse must be claimed on my federal income tax return for the tax year in which the semester falls. A copy of the federal income tax return will be requested by Human Resources in May of the year following this tuition waiver. If this student does not meet the IRS qualifications as a dependent/spouse for the semester in which this tuition is waived, I will be responsible for paying the full amount of the tuition. The dollar value (of tuition) for graduate and law school classes are a taxable non-cash benefit subject to income tax and will be withheld from my paycheck.

_____ _____
Employee Signature Date