



EMPLOYEE AND/OR DEPENDENT TUITION WAIVER FORM



Employee's Name _____

Employee ID # & Position/Title _____

Phone # _____ Email _____

Dependent's Name _____

Dependent's Student ID or SS# _____

Phone # _____ Email _____

Relationship to Employee: (check one) () Self () Spouse () Unmarried Natural or Adopted Child () Unmarried Step-Child () Legal Ward

Does the Dependent live with you? () Yes () No With former Spouse? () Yes () No

(Dependents must reside in the household of the employee or the employee's former spouse. Exception: Step-child must reside in the household of the employee)

Institution to Attend: _____ Term/Year _____

| | | | | |
|---------------|-------------------|--------------------|------------------------|-----------------------|
| Course# _____ | Course Name _____ | Credit Hours _____ | Online: () Yes () No | Audit: () Yes () No |
| Course# _____ | Course Name _____ | Credit Hours _____ | Online: () Yes () No | Audit: () Yes () No |
| Course# _____ | Course Name _____ | Credit Hours _____ | Online: () Yes () No | Audit: () Yes () No |
| Course# _____ | Course Name _____ | Credit Hours _____ | Online: () Yes () No | Audit: () Yes () No |
| Course# _____ | Course Name _____ | Credit Hours _____ | Online: () Yes () No | Audit: () Yes () No |

I certify that I am familiar with the provisions of the State Board of Education Policy 612.02 and that the person(s) requesting the tuition waiver benefits qualifies as an eligible employee or dependent in accordance with Policy 612.02 guidelines (see reverse of form for policy and/or processing steps).

INITIAL BY _____ All fees (other than portion of tuition waiver), books and supplies are the responsibility of the student

EACH ITEM _____ Maximum of one audit per term

AND SIGN _____ Waiver does not apply to repeated courses

BELOW _____ Student must abide by the academic limitations and policies of the attending institution (including any course limitations)

_____ Unofficial Transcripts (and current course schedule) must be attached to this form

Employee Signature _____ Date _____

Supervisor (Required if waiver is for an employee and affects employee working schedule).

Date

Certification: Full Waiver _____

2/3 Waiver _____

1/3 Waiver _____

Full-Time Employment Date _____ or _____

Date of Employee Retirement _____ *

*Dependents are eligible for Waiver for a maximum of 5 years from date of employee retirement

Certifier: Name _____ Date _____

Department/Division of Human Resources

Certification: _____

Student's GPA at least 2.0? () Yes () No

Certifier: Name _____ Date _____

Department/Division of Scholarship Office

I hereby certify that _____

is an eligible employee at _____

and is eligible to receive all benefits granted under the Employee and Dependent Tuition Waiver Program.

President/Vice President/Dean/Director

INSTITUTION TO ATTEND:

I certify that _____ has been approved to receive a tuition waiver for _____ hours (employee/dependent)

at (College or Entity) _____

(President) _____ Date _____

Gadsden State Routing Order: (1) Employee must attach unofficial transcripts and current course schedule (2) Supervisor, if affecting employee work schedule (3) Human Resources to verify employment date and percentage of eligibility (4) Scholarship Office for initial verification of GPA and class eligibility (5) Executive Staff Member (6) President (7) Scholarship Office for final verification and funds processing.

GUIDELINES FOR POLICY 612.02: TUITION ASSISTANCE

I. GENERAL

This tuition waiver program is designed for all full-time and Salary Schedule H-35 employees of The Alabama College System and the Alabama Department of Postsecondary Education and their dependents as defined under Section II. Courses taught by Athens State University are not subject to this policy. The program will be coordinated by each institution for employees within The Alabama College System and the Alabama Department of Postsecondary Education. An application form for the tuition assistance program is available at each institution and should be completed prior to registration for classes. A copy of the completed form must be maintained by the employing institution and the institution offering courses (if different).

II. DEFINITIONS

Employee: Any full-time or Salary Schedule H-35 employee of any System institution and the Alabama Department of Postsecondary Education. This program will not include temporary or part-time employees (other than Salary Schedule H-35 employees), or persons serving as independent contractors to any of the System institutions or to the Alabama Department of Postsecondary Education.
Dependent: The spouse of any full-time employee, the unmarried, natural or adopted children of any full-time employee, residing in the household of the employee or the employee's former spouse; the unmarried stepchildren of any full-time employee, residing in the household of the employee; a legal ward (a minor child placed by the court under the care of a guardian).

III. ELIGIBILITY

A. Requirements

Employees: Employees must have been employed by a System Institution or the Alabama Department of Postsecondary Education for one full academic year or at least 12 months, whichever is less restrictive, prior to the first scheduled day of class for the term for which the employee is applying. Employee eligibility will remain in effect for the duration of their employment in The Alabama College System or the Alabama Department of Postsecondary Education.

B. Termination of Eligibility

Employees: Eligibility terminates if the employee discontinues full-time employment at the respective institution for any reason except on an approved leave of absence.
Dependents: Dependents will be ineligible when said employee becomes ineligible, except that dependents of any employee who has 25 years of more of continuous service in The Alabama College System or the Alabama Department of Postsecondary Education upon retirement from The Alabama College System or the Alabama Department of Postsecondary Education are eligible to participate in the program for a five-year period commencing with the date of the employee's retirement.

IV. AMOUNT OF ASSISTANCE, LIMITATIONS, CONDITIONS, AND AUDITING

A. Tuition Cost

All eligible employees and their dependents will be allowed a waiver of one-third of the normally-charged tuition after the first year (full academic year or 12-month period) of employment; a waiver of two-thirds tuition after the second year of employment; and a waiver of full tuition after the third year of employment (partial tuition adjustments are to be rounded down to the nearest dollar). Salary Schedule H-35 employees will be allowed a waiver calculated at a prorated rate of full-time employment. Expenses for supplies, books, and fees other than tuition will not be waived. Each institution will be allowed to count the credit hours generated by these enrollees.

B. Limitation

There is no limitation as to the number of credit hours taken, other than the regular academic limitations that apply at the respective institutions. All students will be required to abide by the academic policies that are in effect at the institution they are attending.

Dependents: Dependents will be eligible when said employee is eligible, and to the same degree to which the employee is eligible, except as herein modified.

C. Conditions

To be eligible for tuition waiver, the student-employee or dependent must maintain at least a "C" (2.0 on a 4.0 scale) in the courses for which he/she receives tuition assistance. Failure of the student-employee or dependent to meet this grade requirement will result in the employee or dependent's having to pay tuition for courses taken until his/her average grade is "C" or better. The student-employee or dependent can then again be eligible when his/her cumulative grade point average is brought back up to the "C" requirement.

D. Auditing

The student-employee or dependent will be allowed to audit one course (up to five credit hours) per term at no cost. The student-employee or dependent must meet all attendance requirements, class participation, and assignments as required of credit-enrolled students except the final examination is not required. Failure to comply with these requirements will result in the student-employee or dependent becoming ineligible for further participation as an audit student in credit hour-producing courses reported for funding purposes.

E. Repeating Class

Tuition costs for courses repeated will be the responsibility of the student-employee or dependent and consideration under the tuition assistance program will be disallowed. Tuition assistance will be disallowed for repeating a class for which the grade of "W" was originally received.

F. Records Transmittal

The student-employee or dependent must re-certify eligibility, as specified in Condition IV.C. above, prior to registering for a new term by providing verification of course completion to:

1. The Academic or Technical Dean at the institution of attendance; and/or
2. The Academic or Technical Dean at the institution of employment who will forward it to the President for the student-employee's or dependent's permanent file.

Those not registering for the next term must, within twenty (20) days after course completion, present official documentation of course completion to:

1. The Academic or Technical Dean at the institution of attendance; and/or
2. The Academic or Technical Dean at the institution of employment who will forward it to the President for the reportee's permanent file.

G. Work Week

Participation in this program is **in addition** to the employee's full-time work week, and should not be considered when computing the employee's time for financial compensation. However, in certain cases the employee's work schedule may be adjusted to permit course attendance. Adjustments to an employee's weekly work schedule must be recommended by the employee's supervisor and/or Dean, and approved by the President