

APPLICATION FOR TUITION BENEFITS DEPENDENT CHILDREN OF EMPLOYEE



Please complete this form in its entirety and return to the Human Resources office by the deadlines indicated below. Approval of this form by Human Resources indicates an approval of eligibility, but is no indication of whether your child will receive a tuition remission award. In order to receive an award, in addition to meeting eligibility, your child must be accepted for enrollment in his/her school(s) of choice.

Please note, acceptance into a school through the National Exchange program **does not guarantee** a tuition remission award will be granted. Each school allocates a limited number of National Exchange scholarships and awards are competitive. Also, awards through the NW Tuition Exchange Program are generally automatic, as long as the student is accepted. However, **limitations** may apply in the event that a school fails to meet "balance" requirements or withdraws from exchange.

Deadline (to give your dependent child the best chance of receiving an award):

New and Renewal Students – February 1st (for Fall enrollment.)

****Important Note:** Please be advised that **ANY** application for tuition benefit received after Feb. 1st is subject to possible denial **

Applicant Name (Dependent) _____ Social Security Number _____ Telephone _____

Permanent Address _____

Date of high school graduation: _____ Birth date: _____ Email Address: _____

Are you applying for tuition benefits as a **new** _____ or **renewal** _____ student (This form must be completed every year!)

Are you applying for:

____ National Tuition Exchange

____ Northwest Tuition Exchange

____ Willamette University

Exchange Colleges to which you are applying (use back if more):

A current list of National Exchange colleges is available in Financial Aid, Human Resources, or at www.tuitionexchange.org

Year/Semester Requested: *Fall* _____ *Spring* _____ Will be a: *Fresh.* _____ *Soph.* _____ *Jun.* _____ *Snr* _____

Previous # of semesters granted (*limited to 8*) _____ School(s) _____

Employee Name _____ Department _____

Office Phone: _____ Date Hired: _____ Email: _____

Do you have any previous service in an institution of higher education other than Willamette? If "yes," please indicate where and how many full-time years you were employed in higher education: _____

Do you intend to claim the applicant as an income exemption in the current tax year? _____ Year last claimed _____

IMPORTANT! Please attach a copy of the first page of your most recent Federal Tax Return to verify the applicant's dependent status.

We (*the applicant and the employee*) certify that the information provided is accurate and we have reviewed the eligibility rules listed in the employee handbook.

Employee Signature: _____ Date: _____

Eligibility Approved: _____ Date: _____

PLEASE NOTIFY HUMAN RESOURCES (EXT. 6210) OF THE COLLEGE YOU WILL ULTIMATELY ATTEND, OR ANY CHANGES IN ENROLLMENT STATUS (i.e. leave of absence, changing schools, withdrawn, etc.).