



2019/2020 Tuition Remission Form

Student Name: _____

Employee Name: _____

Check Student Type: Undergrad Adult Degree TIP/TOP/FLIP Graduate* Non Degree

Enrollment Term: Fall J-Term Spring Sum 1 Sum 2 (Check all that **may** apply)

Eligible participants, as outlined in the full Tuition Remission policy, shall receive tuition remission for themselves and qualified dependents at Wilson College as a benefit of employment. This is available after one semester of service for the employee, and one year of service for the dependent(s).

All those requesting tuition remission for undergraduate courses must also complete the Free Application for Federal Student Aid (FAFSA) annually unless qualifying for an exception.

Exception to FAFSA filing

- Has a Bachelor's degree
- Is non-degree
- Is enrolling in fewer than 2 full-credit courses per term

*Graduate level courses are considered taxable by the IRS. You may be exempt from this tax if certain criteria are met. Please see the IRS website for further details.

The Director of Human Resources, or designee, is responsible for ensuring that a spouse, domestic partner or child is a dependent for the purposes of this benefit. HR will notify the Financial Aid Office of the student's eligibility of this benefit. Dependency may be proven by providing HR with:

Dependent Child:

The top portion only of the annual tax form showing the dependent child. If the parents are married but filing separate taxes and the child is claimed on the employee's spouse taxes, the spouse's tax form with the dependent child must be presented along with proof of co-habitation (i.e. joint household bill).

Spouse/Partner:

Proof of marriage or domestic partnership

Please refer to the Wilson College Tuition Remission Policy for full detail regarding this benefit. By signing this form, you are indicating you fully understand the policy and all details that may not be included on this form.

Student signature _____ Date _____

Employee signature _____ Date _____

Supervisor signature _____ Date _____

HR review/FA Notification date: _____