**TUITION WAIVER REQUEST FORM
Please read the policy (that includes instructions) found at** [**http://www.boarddocs.com/va/umw/Board.nsf/goto?open&id=96CGR445015F**](http://www.boarddocs.com/va/umw/Board.nsf/goto?open&id=96CGR445015F)**.**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Status:Full-time □ Wage/Hourly/Part time □ Hire Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I request tuition waiver to take \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ credits.

 (number) (Grad or Undergrad)

Course title(s) and Section nos.. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

beginning on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and ending on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The class meets on

 (date) (date)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from\_\_\_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_\_\_.

 (day of week) (start time) (end time)

**Terms of Agreement (Pay Withholding for Non-Compliance):**

|  |
| --- |
| I understand that this policy covers only the cost of tuition, comprehensive fees and laboratory fees associated with coursework. All other fees, including books, application fees, processing fees and/or material costs are not waived under this policy. I understand I am liable for the total cost of the course(s) if I fail to obtain all necessary approvals. The waiver will be applied to my account after all approvals have been made. |

If I do not receive at least a grade of “C” in the course (or “pass” if the course is offered as a pass/fail), fail to submit evidence of course completion, drop the course before completion, or cease employment with UMW during the term of the course, I will be required to repay the University the full amount. **By signing this agreement I authorize the UMW Payroll Office to withhold the cost of tuition and all fees for the course(s) involved from my salary or wages.**  It may also result in collection proceedings.

***(Please note that should the amount paid in a single year exceed the IRS limit of $5,250, the employee will be responsible for income tax on the difference between the amount paid by UMW and $5,250, to be paid by payroll deduction.)***

Employee Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approvals:**

The employee’s performance is satisfactory or at least at the “partially achieved” or “contributor” level.

Supervisor\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*I have attached employee’s MyTime report of hours for the past year to support the average 20 hour per week requirement for wage employees only.

Human Resources \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AVP For Finance \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_