



East Stroudsburg University
Office of Human Resource Management 570-422-3422
Application for Other PASSHE School Tuition Fee Waiver

To be completed in its entirety by faculty/staff member after verifying eligibility. Questions relating to eligibility should be directed to the Benefits staff in the Human Resources Department.

Please Note:

- Qualifying individuals include: eligible faculty & dependents; eligible coaches' dependents; and eligible managers' dependents. For additional eligibility information see Tuition Waiver Policy.
- Tuition Waiver forms will not be approved more than eight (8) weeks before the start of the semester for which the waiver is requested.
- A separate form must be submitted for each semester. Forms requesting multiple semester waivers will not be processed.
- Applications filed after the completion date of the course(s) will not be considered.

Name of: (Check all that apply)

- ☐ Active employee ☐ Annuitant (retiree)
☐ Faculty ☐ Manager ☐ Coach ☐ SCUPA

Name: _____

Employee ID #: _____ **Name of Employing University:** _____

Name of Student: _____

Date of Birth (If waiver is for child of Employee/Annuitant): _____

Relation of Student to Employee/Annuitant: _____

Name of Attending University: _____

Semester/Year: _____

Employee/Annuitant Verification: (If applicable)

I hereby certify that the above-named student qualifies as my child in accordance with, and meets the qualifications defined by the Board of Governor's Policy/APSCUF Collective Bargaining Agreement. I agree to provide the University proof of relationship and age as may be required. I understand it is my responsibility to meet the deadlines for tuition payment at the University attended by the student.

Employee's/Annuitant's Signature

Date

(Guardian or Beneficiary may provide verification of relationship in the event of Employee/Annuitant's Death)

Return this form to the Employing University's Human Resource Department

University Use Only

Human Resources Department at Employing University: The employee/annuitant's eligibility and student's qualification for the tuition waiver have been reviewed, and I hereby certify that the information submitted is true and accurate to the best of my knowledge. PLEASE NOTE: Student eligibility should be verified by the Attending University.

Signature and Title

Date

Forward to Business Office at University attended by student.

Business Office must forward copies to other appropriate offices at Attending University.