

APPLICATION FOR TUITION WAIVER BENEFIT

For APSCUF Covered Employees

NOTE: SECTION I and II must be completed and approved if applicable. Please use one form per course.

SECTION I - TO BE	COMPLETED BY E	MPLOYEE (Please co	omplete all questions in	n this section)				
EMPLOYEE NAME:		STUDENT ID:	BARGAINING UNIT:	EMPLOYING UNIVERSITY:				
				KUTZTOWN UNIVERSITY				
ATTENDING UNIVERSITY:		SEMESTER: YEAR:						
COURSE NUMBER: CO	URSE TITLE:			COURSE LEVEL: CREDITS:				
CITIZENSHIP (PLEASE CHECK	(ONE):							
U.S. Citizen								
U.S. Resident								
Non-resident Alien				<u> </u>				
I understand it is my responsibility to meet the deadlines for tuition and fee payments at the university attended.								
Employee Signature			Date					
	RTMENT HEAD / SU	JPERVISORY APPRO	VAL					
SECTION II – DEPARTMENT HEAD / SUPERVISORY APPROVAL The class(es) will not interfere with the employee's primary duties and is approved.								
,								
Signature - Chair / Sup	ervisor	Signature - Dean / D	irector	Signature – Provost / VP				
SECTION III - GRAD	UATE COURSES	AXATION						
If graduate level courses educational assistance m are non-taxable if they are section in full will result in	are being taken under ay or may not be taxab ijob-related according the classes being treat	er this educational assist the to the employee, depote to the employee, depote to the education of the education and the	ending on the nature of the cannual maximum as defined will be taxable. With respect	ees of the university, the value of the courses taken. Graduate level courses d by the IRS. Failure to complete this ect to the listed graduate level courses				
	er this program, the sup	pervisor or department h	ead must complete the follo	owing questions:				
Course Title:								
Course Description:								

Attending Unive	rsity:							
Name:		Year:						
Course:								
Are these course current salary, st		versity, or by law or re	egulation, to keep the	e employee's	☐ Yes ☐ No			
2. Do these course	s maintain or improve	skills required in the	employee's present	work?	Yes No			
	es required in order to his/her work or busin	meet the minimum eess?	ducational requireme	ents to qualify	Yes No			
Are these course trade or business		of study that will lead t	o qualifying the emp	loyee in a new	Yes No			
and 4 are both no. B	elow, provide any ado n provides the emplo	ated if the answer to editional information ab yee in the new profes	out the employee's j	ob, and how the cou	rse relates to his/her			
I certify that this form is completed accurately and the course is job-related.								
_	nent Chair / Superviso	•	Signature – Dean					
*** Return to Kutztown University's Human Resources Department at the Kemp Building ***								
		Y HUMAN RESOURC	EES					
Graduate level section completed:								
Faculty is tenured/on tenure track or has a 1 year full-time contract:								
Coach has full-time	regular status:				Yes No			
The employee's eligibility for the tuition waiver has been reviewed, and I hereby certify that the information submitted is true and accurate to the best of my knowledge.								
Human Resources				Date				
SECTION V - TO	BE COMPLETED BY	THE BUSINESS OFFI	CE AT THE UNIVERS	SITY ATTENDED BY Non-Taxable	THE EMPLOYEE			
Number of Credits	Per Credit Charge	Total Waiver	Taxable Amount	Amount	Award Code			