APPLICATION FOR A TUITION WAIVER
For Dependent Children Attending Wittenberg

APPLICATION FOR TUITION WAIVER MUST BE COMPLETED ANNUALLY.
PLEASE SUBMIT TO HUMAN RESOURCES.

Under the policies governing waiver of tuition for children of employees of Wittenberg University, and on the basis of information given below, I hereby apply for a tuition waiver for my child; whole name and address are as follows:

NAME: ____________________________

Last First Middle

ADDRESS: ____________________________

SIGNATURE OF FACULTY OR STAFF MEMBER: ____________________________ Date

A. ELIGIBILITY AND RESTRICTIONS

1. The student must be a dependent child of a full-time faculty, administrative or support staff member or a dependent child of an adjunct assistant, adjunct associate or adjunct full professor. We define dependent status as any child claimed as a dependent on federal tax forms. The dependent child must be a biological or a legally adopted child. If the latter, the adoption must have occurred at least five years before the child’s first enrollment at Wittenberg.

   Is this child fully dependent on you? ☐ Yes ☐ No
   This is my natural born child ☐ Yes ☐ No
   This is my legally adopted child ☐ Yes ☐ No Date of adoption _______________

2. Dependent children of support staff members become eligible upon staff member’s employment date.

   What is your beginning date of employment? _______________

3. The children of a deceased tenured faculty member or of a deceased full-time administrative staff member who completed at least five years of continuous full-time service to the university. The children of a deceased adjunct assistant, associate or full professor are also eligible. In each of these categories, the parent must have been actively employed by the university at the time of his or her death. In this case, eligibility for the tuition waiver ceases at the conclusion of the semester during which the dependent's 23rd birthday occurs.

   Check if applicable ☐ Yes Dependent’s Date of Birth _______________
B. **ENROLLMENT**

Each student must qualify for admission to courses or degree programs in the same manner as applicants who are not eligible for a tuition waiver. Eligibility for a tuition waiver does not imply a waiver of regular admission requirements or procedures.

After the student’s application to Wittenberg has been accepted, a tuition waiver form needs to be completed and filed with the Department of Human Resources. This form must be completed and filed on an annual basis.

To be eligible to continue receiving a tuition waiver, the student must meet acceptable academic standards as defined in the University Standards of Academic Progress policy.

C. **COSTS**

The student must be enrolled at full-time status (12-19 semester hours) each semester. A student who is otherwise eligible for a waiver of full tuition but is enrolled for less than full time status per semester is eligible for a waiver of 50% tuition.

*For what semester or academic year are you requesting a tuition waiver? ____________________________*

1. The waiver is limited to a maximum of four academic years (eight semesters under the Wittenberg semester plan) for those students who are enrolled at full-time status. If a student is enrolled at full-time status during a summer session (minimum 12 hours) that session counts toward the maximum eight semesters allowed. A student who is otherwise eligible for a waiver of full tuition but is enrolled during a summer session for less than full-time status is eligible for a waiver of 50% tuition and these classes do not count toward the maximum eight semesters allowed.

*What is the number of semesters for which this child has previously received a tuition waiver? ____________*

*Has this child received a tuition waiver for classes taken during the summer? □ Yes □ No*

2. Should the student complete the bachelor’s degree requirements whether at Wittenberg or elsewhere, or through a combination of both, the child is not entitled to a further waiver although the child may have received a waiver for a total of less than four years, or eight semesters of full-time study.

Approval Signature: ____________________________________________________ Date: __________________

Director of Human Resources

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Voucher Issued ___________________

Amount $_______________________

By____________________________

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