

UNIVERSITY OF CENTRAL ARKANSAS

Due Dates: Fall Tuition – August 31

FACULTY AND STAFF TUITION AND FEE WAIVER (**UNDERGRADUATE**)

Spring Tuition – January 15

Submit by Due Date indicated to Human Resources, Wingo 106

May Intersession/Summer Tuition – May 1

To ensure timely processing, submit application according to due dates outlined above. The student should be pre-enrolled when application is submitted. The total aid provided by this discount when combined with total general registration and mandatory fee aid provided by any other university-sponsored tuition scholarships or other university waiver, fee reduction, or discount shall not exceed 100% of general registration and mandatory fees.

Employee Name: _____ Employee ID # _____ Date Hired: _____

This application is for: (Check One)

____ Employee: **Attach academic schedule as well as work schedule.** Student ID# _____

____ *Employee's Spouse: Name: _____ Student ID# _____

____ *Employee's Child: Name: _____ Student ID# _____ Date of Birth: _____

For: (enter term here) _____ semester of (enter year here) _____ (Applicant must turn in a separate form for each term.)

***For spouse/dependent waiver, EVERY TERM please provide a copy of the front page of your most current Federal Tax Return (income information may be suppressed).**

In cases where the child is not listed as a dependent on your tax return, you may provide a legal document (i.e. divorce decree).

I understand that in accordance with UCA Board Policy, ****my child must meet the IRS definition either of a dependent child or of a qualifying relative (eligible to be claimed as a dependent for federal tax purposes).** UCA Board Policy defines children as the unmarried children of benefits-eligible employees or the unmarried dependents **for whom the employee is the legal guardian**, who are under age 25 and who may be claimed as dependents for federal tax purposes by that employee. An employee may receive a fee waiver for a child meeting the aforementioned definition of children through and including the semester in which the child turns age 25.

For Child Fee Waiver: This is my (check one) child _____ stepchild _____.
For over half the year this child (check one) lives with me _____ does not live with me _____.
As a dependent on my income tax return (check one) I claim this child _____ I do not claim this child _____.

I certify by my signature below that _____ (child) will be eligible to be claimed as a dependent on my federal income tax return for the year of the fee remission.

I understand that if I separate from the University I am obligated to pay the pro-rata portion of the tuition remission represented by the remaining part of the semester following my separation. I further understand that if a child or spouse receiving undergraduate fee remission moves from a dependent or eligible status during a term, I am required to notify the Office of Human Resources and will be required to pay a pro-rata portion of the fee represented by the remaining part of the semester following that change. I understand that under federal regulations this is a taxable benefit and will be taxed accordingly.

Employee Signature: _____ Date: _____

Department Head Approval: _____ Date: _____

(Department Head Approval Not Required for Spouse/Child Application)