

Finance Office
 College Hall, Room B-04
 Ext. 5129 (V), 5447 (TTY)
 Fax (202) 651-5711

GALLAUDET UNIVERSITY APPLICATION FOR TUITION WAIVER

Employee Name		Employment Date		Full or Part Time	
Position		Department			
Extension	E-Mail Address	Regular or Temp Status			

TEMPORARY STATUS EMPLOYEES ARE NOT ELIGIBLE FOR TUITION WAIVER. PART-TIME EMPLOYEES AND THEIR FAMILY MEMBERS MAY APPLY FOR TUITION WAIVER FOR ONE COURSE PER SEMESTER.

Student Name	Relationship To Employee*	Gallaudet ID #	
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* If the relationship is a domestic partner, an affidavit must be on file in the Personnel Office.

TUITION WAIVER DOES NOT APPLY TO COURSES THAT ARE AUDITED

Subject or Course (please attach class registration form)	Undergraduate Or Graduate*	Course #	Credit hours	Day/Time	FINANCE USE ONLY: COURSE COST
Total # of hours					
Term Begins		Term Ends			

Semester for which funds are requested (Fall, Spring or Summer) _____

Total number of full-time credit hours (12 or greater) _____ or part-time credit hours (under 12) _____

IF YOU ARE ASKING FOR TUITION WAIVER FOR ANY GRADUATE COURSES, YOUR SUPERVISOR MUST ANSWER ALL OF THE FOLLOWING QUESTIONS. IF UNDERGRADUATE, SKIP THIS SECTION.

- Does the course(s) enable your staff to meet the minimum requirements for continued employment? Yes * No
- Is the staff person required to take the course(s) to maintain or improve his or her skills? Yes * No
- Is the staff person required to take the course(s) because it is a condition for keeping your position or status or rate of compensation? Yes * No
- Will the course(s) allow the staff to qualify for a new trade or business? Yes * No

*** If "Yes", documentation or explanation must be attached.**

SIGNATURES:

Employee		Date	
Unit Administrator		Date	
Registration Official		Date	
Finance Office		Date	

PLEASE NOTE

THE UNIVERSITY FOLLOWS ALL IRS AND US TAX COURT RULINGS REGARDING WITHHOLDING AND REPORTING REQUIREMENTS. PLEASE READ THE BACK OF THIS FORM CAREFULLY.

This form must be submitted each semester no later than one week from the last day of add/drop courses. If it is not submitted in a timely manner, you may not be eligible for tuition waiver.

TAX IMPLICATIONS FOR TUITION WAIVER PER CALENDAR YEAR

TAXABLE	NOT TAXABLE
	Employee Undergraduate
	Spouse Undergraduate
	Eligible Children Undergraduate
Domestic Partner Undergraduate	
Employee Graduate	Employee Graduate
Excess of \$5,250 if conditions are not met.	First \$5,250 is not taxable. Excess of \$5,250 is not taxable if: (1) the expenses do not enable the employee to meet the minimum requirements for employment; and (2) the education maintains or improves the skills required of the employee in his/her employment or meets the expressed requirements of the University, imposed as a condition to the employee retaining his/her employment, status, or rate of compensation; AND (3) the education does not qualify the employee for a new career, employment, trade or business.
Spouse Graduate	
Children Graduate	
Domestic Partner Graduate	

IF TAXABLE, FEDERAL, STATE, SOCIAL SECURITY, AND MEDICARE TAXES FOR THE TUITION WAIVER WILL BE DEDUCTED FROM YOUR PAYCHECK. TAXES ARE DUE AT THE TIME THE BENEFIT IS GIVEN.

AGREEMENT

In accepting tuition waiver from Gallaudet University, I agree to the following:

- A. If educational assistance is paid at the beginning of the course, I will submit a registration receipt within 30 days of the start of the course.
- B. I will submit evidence of satisfactory course completion as soon as possible but no later than 90 days from the date of course completion. I understand that "satisfactory course completion" is defined as a grade "C" or better for undergraduate students or as a grade "B" or better for graduate students, or "pass" if under a pass or fail grading system. In the event a grade or pass/fail is not assigned to the course, I will submit a statement from the advisor or school administrator attesting that all objectives have been satisfactorily completed. **Tuition waiver does not apply to classes that are audited.**
- C. In the event the student or I withdraw from the course after the final withdrawal date, the student's coursework drops below the original request or falls below a full-time course load as defined by the student's university, the course is cancelled, the student or I do not satisfactorily complete the course, I do not submit evidence of satisfactory course completion, or I voluntarily leave the University while the course is in progress, I will reimburse the University in the amount of the standard course fee.
- D. The University may recover any debit I owe for tuition waiver by offsetting my salary, leave reimbursement, or retirement, or the University may pursue other legal recourse.

I understand that the receipt of the benefit for a course or semester is not a guarantee of continued benefits for future semesters or courses. The University may, at its discretion, deny a request for tuition waiver.

CERTIFICATION

If the application is for someone other than myself, I certify, under penalty of perjury, that the student named on this application is (check one):

- My spouse
- My domestic partner **for whom I have filed an Affidavit of Domestic Partnership with the Personnel Office**
- My dependent child, stepchild, or legally adopted child*
- My foster child**

* If the application is for my dependent child, stepchild (by marriage), or legally adopted child, I further certify that the child meets all conditions for dependency as defined by current Internal Revenue Service (IRS) regulations.

Signature

** If the application is for my dependent foster child, I certify that : (1) the child has not reached the age of majority as determined under applicable state law; (2) the principal place of abode of the child is my home and the child was a member of my household at all times and for all purposes during the calendar year in which I received the tuition reduction; (3) the relationship between the child and me is not in violation of any applicable federal, state, or local law; (4) I maintain and occupy the home in which the child is a member; (5) the child received over half of his/her support from me during the calendar year in which he/she received tuition reduction (including food, shelter, clothing, medical, and dental care, education, and the like); (6) I am not the parent or adoptive parent of the child but care for child as if he/she were my own.

Signature

I have read and understand the information above regarding the tax implications of tuition waiver.

I understand that willful falsification of information on this application may lead to disciplinary action, up to and including discharge from the University. I also agree to notify the University immediately if my domestic partnership terminates.

I understand and agree to abide by all conditions of this agreement.

Employee

Date