



Request for Faculty/Staff Tuition Waiver

THIS FORM MUST BE COMPLETED AND APPROVED PRIOR TO PAYMENT OF CHARGES

Board of Regents Policy 940.13 allows units of the Montana University System to grant waivers of tuition to permanent employees who are employed **at least .75 FTE during the entire period of enrollment**, when they are enrolled in credit courses. The authorized waiver for faculty and staff is limited to 6 credits per semester, per MSU-Northern policy 804.2.

Name _____ Banner ID# _____

Title and Department _____

Campus _____ Phone # _____ Faculty Staff

Semester Spring Fall Summer Academic Year _____

| Course # | Credits | Course Description | Time | Days |
|----------|---------|--------------------|------|------|
| | | | | |
| | | | | |
| | | | | |

Total Credits _____

I understand that the value of the faculty/staff tuition waiver is taxable income if my admission status is graduate degree or graduate non-degree. The applicable taxes will be deducted from my payroll earnings. I hereby authorize the University Payroll Office to withhold from my final paycheck the value of this tuition waiver in the event I terminate my employment with the University prior to completion of the course(s) for which I have been granted the waiver.

Employee Signature _____ Date _____

Supervisor signature indicates that the employee has satisfactorily rescheduled any time missed from work.

Supervisor Signature _____ Date _____

Employment Certification

Employee FTE on Date of Registration _____

If request is for Summer Session: FTE appointment preceding year _____ FTE appointment succeeding year _____

Director of Human Resources Signature _____ Date _____

If employed by a Montana University System campus other than MSU-Northern

Signature _____ Date _____

Employing campus Human Resource/Personnel Representative