

# REQUEST FOR FACULTY/STAFF TUITION WAIVER

This waiver may be subject to Federal Income Taxation and withholding guidelines as of January 1, 2009.

I hereby request a waiver for the school year 20\_\_\_\_: Semester: fall \_\_\_\_; spring \_\_\_\_; or summer: 1<sup>st</sup> term \_\_\_\_; 2<sup>nd</sup> term \_\_\_\_  
at SAU Magnolia: \_\_\_\_ SAU Tech: \_\_\_\_ South Ark.: \_\_\_\_.

Request for: \_\_\_\_ self (see I, II, and IV) \_\_\_\_ dependent (see I, III, and IV)

## I. Faculty/Staff Information

Name: \_\_\_\_\_ Employee ID Number: \_\_\_\_\_  
Employed at: SAU Magnolia \_\_\_\_\_ SAU Tech \_\_\_\_\_ South Ark \_\_\_\_\_ Employment date: \_\_\_\_\_  
Department/Area \_\_\_\_\_

## II. Waiver for Self

I, \_\_\_\_\_, request permission to enroll in the course(s) listed below:

Course Name	Course Dates		Course Meeting	
	Start	End	Day(s)	Hour(s)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

\_\_\_\_ My supervisor requests that this course be considered as on-the-job training and that I not be required to make up the work time missed because \_\_\_\_\_

\_\_\_\_ I will make up the work time missed by \_\_\_\_\_

## III. Waiver for Spouse or Dependent Child

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_  
 Spouse       Dependent Child      Date of birth \_\_\_\_\_

Address: \_\_\_\_\_

I certify that the dependent child, as defined by the Internal Revenue Service, is unmarried and age 26 or younger and has been claimed by me for income tax purposes in the preceding year and will be claimed by me during the time of the tuition waiver. I agree to furnish documentation in support of the validity of the above statements, including, if requested, copies of federal and state income tax returns as may be necessary to confirm my claim of dependent status.

## IV. Approval

_____ Employee's Signature	_____ Date	_____ Vice President's/Vice Chancellor's approval	_____ Date
_____ Dean/Department Head approval	_____ Date	_____ President's/Chancellor's approval	_____ Date



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Office Use Only			
____ Business Office	____ Personnel Office	____ Financial Aid Office (Transmittal of Aid)	
____ Financial Aid Office	____ Presidents Approval	Amount \$ _____	