

CERTIFICATION FOR TUITION WAIVER

Form must be completed each semester a waiver is sought

Waiver for: ..Employee ..Spouse/Domestic Partner ..Dependent Child

Semester/Year Fall _____ (year) _____ Spring _____ (year) _____ Summer _____ (year) _____

Employee Name _____ 7-Digit Employee ID Number _____

Dept. _____ Title _____

Phone _____ Email _____

Employment Status ..Staff ..Full-time ..Faculty ..Part-time ..Retired ..Other _____

Student Name _____ 7-Digit Student ID Number _____
(if different from employee information)

CWRU College or School Enrolled _____ Degree Sought (or enter non-degree) _____

Credit Hours Registered _____ ' H S H Q G H Q W ¶ V ' D W H R I % L U W K _____

Admit Term _____

...Undergrad

OVERVIEW

1. Official Class Schedule: student schedules will be checked in SIS. A paper copy is not required.
2. Waivers will not be issued for continuing education courses, audited courses, or certificate program coursework outside of WKH XQLYHUVLW\¶V *HQHUDO %XOOHWLQ FRXUVHV
3. Withholdings for taxable courses (see policy for definition of taxable courses) will be made, in accordance with the employee's marital status and claimed allowances, over several months each semester, as follows: September through December for the Fall semester, February through May for the Spring semester, and July through August for the Summer semester. Marital status (for income tax purposes only) and allowances may be changed by submitting a new W-