TUITION REMISSION/WAIVER

STUDENTS NAME (LAST, FIRST, MIDDLE)		STUDENT BIRTHDATE
REQUESTED BY (NAME OF WHITMAN EMPLOYEE)	EVEN (DE	
	EXEMPT	FULLTIME
DATE OF HIRE	NON-EXEMPT WHITMAN ID#	PART-TIME%
FEE REMISSION (PAYMENT OF TUITION FOR ATTENDANCE AT OTHER COLLEGE/UNIVERSITY)		
COLLEGE/UNIVERSITY		NW TUITION
		CASH GRANT
ADDRESS (STREET)		
CITY	STATE/ZIP	
INSTITUTION'S	PAYMENT REQUESTED	
TUITION \$	FROM WHITMAN COLLEGE \$	
1st SEMESTER 20	FALL QTR 20 PER	CENT OF
PAYMENT IS FOR 2nd SEMESTER 20	FALL QTR 20 PER WINTER QTR 20 FUL SPRING QTR 20 ATT	LTIME ENDANCE %
MAKE CHECK PAYABLE TO: EMPLOYEE COLLEGE/UNIVERSITY		
CHECK DELIVERY MAIL TO ABOVE ADDRESS (COLLEGE/UNIVERSITY)		
INSTRUCTIONS EMPLOYEE WILL PICK UP (Mem 107) Ext # EMPLOYEE E-CHECK (must be signed up for direct deposit for reimbursements)		
MAIL TO		
WAIVER OF WHITMAN TUITION FOR CHILD		
% OF FEE WAIVED FALL SEMESTER FULL-TIME STUDENT		
SPRING SEMESTER		
Employee requests a fee remission or tuition waiver as indicated above. The employee does hereby certify that the child		
is a legal dependent (IRS definition) of the employee and is under the age of 24. If tuition is granted to an employee for any person which falls outside the dependent status, this benefit is a taxable benefit to the employee and will be reported		
according to IRS regulations. A copy of the school's tuition statement is required each semester/quarter.		
EMPLOYEE SIGNATUREDATE		DATE
APPROVED DATE	(BUSINESS OFFICE USE ONLY)	DATE
	ACCOUNT NUMBER	
	VOUCHER ID	
	CHECK NUMBER	