

# TCL Employee Tuition Waiver Request

Employee's Name: \_\_\_\_\_

Requested Course(s): \_\_\_\_\_

\_\_\_\_\_

Term: \_\_\_\_\_

Course Meeting Times: \_\_\_\_\_

\_\_\_\_\_

I understand that charge waivers apply to tuition, registration, capital and high-cost course fees only. I am responsible for any additional course specific fees, as well as any needed books and class materials.

I understand that any other financial aid I receive will reduce the amount of the Employee Tuition Waiver by a corresponding amount.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
VP's Signature

\_\_\_\_\_  
Date

After registering for your classes, submit this complete and signed form to the Business Office in Building 3 to receive your waiver. All signatures must be present for the waiver to be granted. A copy of this form will be forwarded to HR for inclusion in your personnel file.

Employee tuition waivers are governed by TCL Procedure 2-1-202.1. Please refer to this resource for further information.

\*Before authorizing, supervisors must check with HR to ensure employee is eligible per the procedure