

University of Alaska Anchorage  
**TUITION WAIVER REQUEST**

Semester: Spring Summer Fall 20\_\_\_\_  
(Year)

\_\_\_\_\_  
**Student Name** (dependent, spouse/domestic partner, senior citizen) \_\_\_\_\_  
*If waiver is for dependent, spouse or domestic partner, employee/adjunct information is required* Student ID Number

\_\_\_\_\_  
**Adjunct Faculty Name** (if student is dependent/spouse/domestic partner) \_\_\_\_\_  
Adjunct ID Number

\_\_\_\_\_  
**Employee Name** (if student is dependent/spouse/domestic partner) \_\_\_\_\_  
Employee ID Number

WAIVER TYPE	
<input type="checkbox"/>	<b>Employee/Disabled – Regent’s Policy 04.06.010</b>
<input type="checkbox"/>	Spouse/Domestic Partner (Statement of FI on file at HR office)
<input type="checkbox"/>	Dependent (under age 24)
<input type="checkbox"/>	Emeritus Status / Layoff / Disability (per State retirement system)
<input type="checkbox"/>	AFROTC (per AFROTC/Chancellor agreement)
<input type="checkbox"/>	<b>Adjunct Faculty – Collective Bargaining Agreement 14.2</b>
<input type="checkbox"/>	Spouse/Domestic Partner (Statement of FI on file at HR office)
<input type="checkbox"/>	Dependent (under age 24)
<input type="checkbox"/>	<b>Senior Citizen – Regent’s Policy 05.10.01(E)(3)</b>

- ✚ Waiver covers **TUITION ONLY** and *must* be turned in when paying fees. NO reimbursements will be made.
- ✚ Educational benefits do not apply to fees, non-credit courses or courses that have fees in lieu of tuition or in which tuition/surcharges exceed the university norm.
- ✚ Fees not covered by waiver (i.e., student activity fees, course lab fees, health center fees, technology fees) are student’s responsibility and must be paid by deadline.
- ✚ For a domestic partner, a “UA Statement of Financial Interdependence” (Statement of FI) must be approved and on file at Human Resource Services/Personnel.

<b>COURSES WAIVED</b> (not applicable to fees, non-credit courses or courses that have fees in lieu of tuition)								Graduate Courses	
CRN	Department	Course No.	Section	Course Title	Days	Hours/Time ♦	No. Credits	Yes	No
_____	_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

**Taxable Tuition:** Tuition waived for graduate courses (i.e., 600 level) taken by a university employee, adjunct, his or her spouse/domestic partner or dependent(s) is taxable to the employee/adjunct and will be included in the employee/adjunct’s W-2 as taxable income.

<b>EMPLOYEE EDUCATIONAL BENEFITS CRITERIA</b>	
1.	Employee must be on active status the <i>first day of class</i> during the semester in which the waiver is requested in order to be eligible.
2.	Employee is eligible to have tuition waived for up to 6 credits per semester for a maximum of 12 credits per academic year ( <i>Fall through Summer</i> ).
3.	Employee’s spouse/domestic partner or dependent child ( <i>under age 24</i> ) may have unlimited eligible credits/tuition waived.

<b>ADJUNCT FACULTY EDUCATIONAL BENEFITS CRITERIA</b>	
Adjunct faculty earn up to 3 hours of tuition credit per semester of employment that can be used by the adjunct, his or her spouse/domestic partner and/or dependent child ( <i>under age 24</i> ) if the following conditions apply. One or more persons may use the waiver provided enough credits are banked.	
1.	Adjunct must be eligible for the tuition waiver pursuant to CBA Article 14.2 between the University of Alaska and United Academic-Adjuncts.
2.	Adjunct contract must be for teaching a course(s) for credit during the semester in which the tuition credit was earned.
3.	Adjunct must promptly apply for and document eligibility for the tuition waiver prior to fee payment. No refund of paid tuition will result from the application of this provision ( <i>excludes financial aid automatically processed prior to the start of the semester</i> ).
4.	Waiver is valid on a “space available” basis only. It cannot be used to waive tuition for a class that was full or had a wait-list on the first day of class <b>OR</b> the date the student paid, whichever was later.
5.	Waiver cannot be used until the start date of the class, as listed in the course schedule, for which the waiver is being used. Additional enrolled credits not covered by the waiver must be paid by the fee payment deadline. Late starting classes should be added after any regular semester-length courses are paid for ( <i>by the fee payment deadline</i> ).
6.	Adjunct may accrue tuition credits up to a maximum of 12 credits. Banked credits expire 12 months after the adjunct’s last assignment in the unit represented by United Academic-Adjuncts or upon employment in another employee-class eligible for tuition waivers.

<b>EMPLOYEE / ADJUNCT FACULTY STATEMENT OF ELIGIBILITY</b>	
I certify that I am eligible for the tuition waiver requested for myself, my spouse/domestic partner or my dependent ( <i>under age 24</i> ) and agree to take full responsibility for tuition charges should it be determined I am not eligible for this waiver. If waiver is for my domestic partner, a “UA Statement of Financial Interdependence” is approved and on file at my Human Resource Services/Personnel office. If an employee, I have had _____ credits waived during the current academic year (Fall through Summer, maximum of 12).	
Employee/Adjunct Faculty Signature: _____	Phone # _____ Date: _____

<b>EMPLOYER VERIFICATION OF ELIGIBILITY</b>	
The above-listed employee/adjunct faculty, his or her spouse/domestic partner or dependent ( <i>under age 24</i> ) is eligible for this tuition waiver.	
Dean/Director/Department Head Signature: _____	Phone # _____ Date: _____
♦ <b>Approval for Course(s) Taken During Working Hours</b> ( <i>see class times above</i> ): Department Head Signature: _____	

<b>SENIOR CITIZEN CERTIFICATION OF ELIGIBILITY</b>	
I certify that I qualify for this waiver under Regent’s Policy 05.10.01(E)(3). Waiver is valid on a “space available” basis only, when courses can accommodate seniors in addition to regularly enrolled students.	
Senior Citizen Signature: _____	Phone # _____ Date: _____