



TUITION REMISSION APPLICATION

Colleague Form

Complete and return this form to the Human Resources Department prior to the semester in which tuition is to be waived.

All Colleagues must complete this section.			
ACADEMIC YEAR:		TERM: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer	
Colleague Name		Colleague Classification <input type="checkbox"/> Faculty <input type="checkbox"/> Administration <input type="checkbox"/> Support Staff	
Colleague Gannon ID	Department	Colleague Status <input type="checkbox"/> Active <input type="checkbox"/> Retired <input type="checkbox"/> Disabled	
Complete this section only if taking UNDERGRADUATE courses.			
U N D E R G R A D	Major Field of Study	Number of Credits	Are classes scheduled during work hours? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Colleague Signature		Date
Complete this section only if taking GRADUATE courses. Doctoral work is excluded.			
G R A D U A T E	1. I understand that any tuition value greater than \$5,250 during a given calendar year is subject to all tax withholdings. I understand that this will be considered a taxable benefit for which taxes will be withheld from my regular income.		
	2. I acknowledge that it is my responsibility to inform the Payroll Office (Human Resources) in the event that I will exceed this maximum. Failure to notify the Payroll Office may result in a revised W2 Form.		
	Major Field of Study	Number of Credits	Are classes scheduled during work hours? <input type="checkbox"/> Yes <input type="checkbox"/> No
Colleague Signature		Date	
Supervisor and Dean must authorize before a Voucher will be issued by HR.			
Supervisor Signature (Undergraduate & Graduate)		Date	
Dean or Director Signature (Graduate Only)		Date	
Financial Aid Verification	Date	Voucher Issued	Date