

Andrews University

EMPLOYEE/SPOUSE REGISTRATION FOR TUITION ASSISTANCE Semester & Year _____

Failure to complete ALL relevant sections may delay enrollment and credit to your account.

Employees (Complete **only** if you are an employee taking a class)

ID# _____ First Name _____ Last Name _____
 Your Department name _____ Supervisor Approval _____ Date _____

For AU Employee Spouses (Complete if you are an AU employee spouse taking a class)

Your ID# _____ First Name _____ Last Name _____
 Employee's ID# _____ Employee's Full Name _____

***If you have not been assigned an AU ID # please contact the Records Office.**

The tuition waiver is a forgiveness of tuition that is available to qualified employees & spouse who occupy available positions in a regularly scheduled class and thus **does not include independent study, internship, directed reading, private music lessons, practicum, clinical experiences or any instruction outside of the normal classroom setting.** (Online classes may be included if they meet the other criteria for the class).

I wish to take courses at the following level: <input type="radio"/> Undergraduate level <input type="radio"/> Graduate level - Degree received _____ - Name of institution _____ - Date of degree received _____	I wish to take the course for: <input type="radio"/> Audit _____ (Teacher's Signature Required) <input type="radio"/> Receive Academic Credit I am/am not working on the following degree _____ (please circle one) Advisor's Signature _____
--	--

COURSE(S)

Prefix	Number	Section	Course Name	Credits	Days	Time

Student Accounts signature required if more than: 1 free class (employees)/4 free credits (spouse) _____

1. If you plan to complete a degree program you must make formal application for admission to the degree program. (If you are applying for a graduate degree only 12 credits of Permission To Take Class (PTC) can apply toward a degree and if applying for an undergraduate degree only 32 credits of PTC can apply toward a degree.)
2. If you are in a degree program you must obtain your advisor's signature.
3. If you are taking more than 4 credits, you must obtain financial clearance. The policy covers tuition only. All other costs such as general registration, late fee, drop/add, lab fees, and change of program, etc, are to be paid by the student.
4. This form must be turned in to the Office of Human Resources (Administration Building) anytime during registration. Any late registration charges are the expense of the faculty/staff member. The faculty/staff member will be registered only after it has been determined that there are sufficient tuition-paying students registered for the class. Also, in classes with limited enrollment, tuition-paying students have priority. **If at some point you decide to drop your class you will need to complete a drop/add form and turn it into the Records Office.** Any refund will be applied on the day the transaction takes place.
5. For work related classes, there must be a memo from employee's supervisor indicating that the class is work related.
6. Classes dropped after drop/add date may still incur taxable income.
7. The free tuition policy provides:
 - **For Employees:** Full-time regular staff members may take up to four credits each semester without cost to themselves through Doctoral level. Normally, the class must be outside of regular scheduled work hours. Employees are not paid for the time they are attending class.
 - **For Employees' Spouse:** The spouse of a regular salaried full-time employee may receive assistance through the Master's level. Assistance is up to four credits free plus 50% of the tuition on classes in excess of four credits each semester.

NOTE: The IRS considers the tuition waiver for graduate level courses taken by the employee or spouse as part of the employee's wage package and therefore may be subject to taxes. All classes taken by non-employees under this policy are subject to IRS reporting and attendees will receive a 1099 Miscellaneous form.

I have read and accepted the terms and conditions mentioned above.

Employee Signature _____ Date _____ Spouse Signature (If Applicable) _____ Date _____

Office Use Only

1. Human Resources _____ 2. Records—Original _____