



University of Sioux Falls Tuition Remission Application

Please complete this form if you, your spouse, or your dependent children/step children (up to age 24) will be attending the University of Sioux Falls and desire our tuition remission assistance.

Name of Employee _____ Employer/Department _____

Name of Recipient _____ Date of Birth _____

Relationship of Recipient to Employee Self Spouse Child/Step Child

Recipient's Social Security Number _____

Address _____ City, State Zip _____

Home Phone _____ Cell Phone _____

Term Requesting Benefit Fall 20__ Interim 20__ Spring 20__ Summer I 20__ Summer II 20__

(A new form is required for each term.)

Program(s) are you requesting tuition remission

Undergraduate Number of Credits _____

Graduate Number of Credits _____

DCP M.Ed. MBA Ed Specialist

Start Date _____

Have you been accepted for admission into this program? Yes No

Center for Women Workshop(s)

List name of workshop(s) _____

Number of Credits _____ Date(s) of workshop(s) _____

Once you have registered for coursework, submit this form to the USF Human Resources Office.

- **This form requires a supervisor signature for processing.**
- Any student receiving tuition remission from the University who does not "pass" or who "drops out" of a course after the 2nd week of class will be required to pay an administrative fee of \$50 to the University.
- All employees will pay at least 10% tuition for themselves, spouse and dependent children.
- Tuition remission benefit year runs from September to August (summer tuition remission is not guaranteed-based on fall & spring attendance)

Employee Signature _____ Date _____

Recipient Signature _____ Date _____

Supervisor Signature _____ Date _____

OFFICE USE ONLY (year runs September through August)

To be completed by Human Resource Office

To be completed by Financial Aid Office

Total Annual Remission Allowed _____

Fall Semester 200__ Number of Credits _____

HR Signature & Date _____

Interim 200__ Number of Credits _____

To be completed by Financial Aid Office

Spring 200__ Number of Credits _____

Tuition remission already credited _____

Summer Session I 200__ Number of Credits _____

Remaining Eligibility _____

Summer Session II 200__ Number of Credits _____

Amount used this term _____

Full Summer 200__ Number of Credits _____