

Request for Employee Tuition Waiver

Full-time and part-time regular employees and qualifying part-time faculty are eligible for tuition waiver in accordance with Board of Trustees Policy and collective bargaining agreements.

This form, when approved, grants tuition waiver only. Unified Fee will be waived if appropriate. This form does not enroll the employee in the desired course(s). Enrollment is the employee's responsibility. This form must be completed prior to the beginning of each semester for which tuition waiver is requested and after enrollment is completed. A tuition waiver is required for courses which are audited.

Please refer to your employee handbook or collective bargaining agreement at http://www.maine.edu/about-the-system/system-office/human-resources/, for more information on tuition waiver eligibility.

SECTION I:	Employee completes Section I and forwards to supervisor for review and signature.							
Request for tuition waiver is made in accordance with the provisions of the following: (Check one.)								
Non −represented □ Police □ Cleric					argaining Agreement Office/Laboratory/Technical onal & Administrative □ Part-time Faculty			
Name (Last, First, Middle)					Employee ID #		Campus of Employment	
Employment Status ☐ Full-time Regular ☐ Part-time Faculty					Date of Hire		Campus Address	
Campus of Enrollment Semester <u>or</u> Session/Year Applied for					Student Status ☐ Undergraduate ☐ Graduate ☐ Non-Degree			
Course #	Sec	ction #	Start Date	7	ime	Day(s) of	f Week Cr	edit Hours
If the course meets outside of regularly scheduled work hours, the supervisor reviews and signs the form. If the course meets during regularly scheduled work hours, supervisory approval is required. The employee must make arrangements to make up the time or to use leave without pay or annual leave. Such arrangements are subject to supervisory approval. Graduate tuition waivers over \$5,250 are treated as taxable income under IRS regulations.								
Employee's Signature							Date	
SECTION II: SECTION II: SECTION II: Supervisor completes Section II. The Supervisor signs, makes a copy, and forwards the original form to the UMS Employee Benefits Center. If disapproved, the supervisor includes an attachment indicating the reason for denial.								
☐ Approved☐ Disapproved			or's Signatur	Date		,		
SECTION III: The UMS Employee Benefits Center completes Section III. If approved, the EBC will apply waiver directly to student account. If the request is disapproved, the employee will be notified. If a request for graduate tuition waiver is approved, the EBC will apply appropriate taxation as necessary.								
☐ Approved as Meeting Waiv☐ Disapproved as Not Meetin				for Disappro	oval	EBC S	Staff	Date
Cost to the University \$		Details:					Date	

Contact Information Questions and/or completed forms should be directed to the UMS Employee Benefits Center, Fax: (207) 561-3454, Email: benefits@maine.edu, Tel: Toll-free (866) 269-9635 or Local (207) 973-3373, 16 Central St., Bangor ME 04401 Please allow 10 business days for processing AFTER billing charges have been generated. You will be notified via email once the waiver has been processed.