



Application for Tuition Waiver **Faculty/Staff of The University of North Carolina**

Tuition Waiver Policy

The waiver of tuition for a faculty or staff member shall be limited to not more than **three (3) courses per academic year**. Tuition waiver can be used for Fall, Spring or Summer School courses. Tuition costs may be waived for credit courses and non-credit courses.

Eligible institutions are WSSU and other branches of the UNC system. Application or pre-registration procedures may differ between UNC institutions. It is the employee's responsibility to be familiar with any variations in procedures.

Applicant must submit an application for each waived course. Waivers are term specific. Approved waivers must be delivered to the Students Accounts Office by the last day of the drop/add period for the semester.

Financial Aid - Employees receiving non-repayable Financial Aid (Pell Grant Scholarship, etc.) are eligible for tuition or fee waiver.

Assistance is not granted for costs of transportation, graduation, examinations, administration, supplies, or textbooks.

Assistance from any other financial aid program shall not be duplicated under this program.

A tuition-waived course should be taken on the employee's own time. Where feasible, supervisors are encouraged to adjust the employee's work schedule to accomplish this.

Procedural Note: Adjustments in the employee's work schedule or lunch must be provided in writing and signed by the employee's supervisor to submit to Human Resources along with the Tuition Waiver application.



Application Course Information

1. Applicant (*full name*): _____ *Banner ID* _____
2. Employing University: _____
3. Employee Title and/or Faculty Rank (and, if service member or civilian in support of ROTC program, so state): _____
4. UNC Campus offering the course you wish to take tuition-free: _____
5. Semester in which course will be offered: _____
6. Title of Course: _____
7. Course Number: _____
8. Credit Hours of Course: _____
9. Course Day(s) and Time(s): _____
10. Level of Course (graduate, undergraduate, special, etc.): _____

Certifications / Approvals

Applicant: I hereby certify that I have completed this application fully and accurately to the best of my knowledge. If there are any tax consequences resulting from this tuition waiver, I understand appropriate taxes will be withheld from my paycheck.

Signature: _____ Date: _____

Employing Institution – Supervisor/Department Head: Enrollment in the tuition-free course identified above will not interfere or conflict with the satisfactory performance of normal employment obligations by the above-named applicant.

Signature: _____ Date: _____

Employing Institution – Human Resources: This employee is permanent full-time, working at least 30 hours per week.

Signature: _____ Date: _____

Enrolling Institution – Registrar: The above-named applicant has been found academically eligible to enroll in the course identified in items 6-8 and there is space available in the selected course.

Signature: _____ Date: _____