

TUITION REMISSION AGREEMENT

Please refer to Policies and Guidelines for Tuition Remission Program in your Faculty Handbook/Policy & Procedure Manual for details about this benefit.

Application deadlines are as follows:

- July 15 - Fall Semester
- December 15 - Spring Semester
- May 1 - Summer Semester

Employee Name: _____

Date of Hire: _____

Student Name: _____

' D W H R I % L U W K: _____

Relation to Employee: _____

Date of VWU Admission: _____

Qualifications

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WLPH HPSOR\HH SOHDVH VQIRVHH GHSHQG
HPSOR\HHV DUH QRW HOLJLEOH IRU WKLV EHQHILW
" +DYH FRPSOHWHG DQ DSSOLFDWLRQ IRU 7XLWLRQ 5HPLV\ILROOLQ DFFR
VPHVWHU 'HVSUPEHQJ VPHPH\WXR B H ODXHPHVWHUV 7XLWLRQ UHPLVVLRQ
7HUP

(DFK HPSOR\HH LV H[SHFWHG WR JUDLW V\XFFH\W\W\XONH Q B VPR\WPH\HW@ BQ" @ FaR XMU X1H0/0
DQ\ JLYHQ ILVF DO LPHW RWKHEUHGMLW KRXUV SHU VPHVWHU RI HQUROOPHG
FRSOR\HH HWZ IXFL QVXW\W L W Q R I O H U H P (L P S O L R Q H E V I Z K R L D G W H Z U M B D N S O J V B N X O O R V F E R Q U A H
B R R U E M I V R I Q V E H Q H I I L W F D O D H B Q U R D O W p l a

VHOHFW RQH SURJUDP GXULQJ WKH VPHVWHU \H DU

I have read the Policies and Guidelines for Tuition Remission and agree to abide by my obligations when using this benefit.

Student Signature

Employee Signature

Date

Supervisor Approval (when student is employee):

Date

Human Resource Approval:

' D W H

Date: _____