

## **Employee Tuition Waiver Program Request** Form Human Resources 4700 Research Way, Lakeland, FL 33805-8531 863-874-8421

Subject to University regulation FPU-4.002 and University policies, full-time Florida Polytechnic University employees who meet academic requirements may, if approved by their supervisor below, register for up to six (6) college credit hours per semester at Florida Poly, on a space available basis, and the University will waive the tuition and related fees for such hours. Employee is responsible for completing the form, getting the form signed by his/her supervisor and submitting the form to Human Resources for approval prior to registering for the course(s).

Employee's Full Name:	Job Title:
College/Department:	Email Address:
Employee's Supervisor:	Phone:
Student ID#:	Employee ID#:
Requesting Registration for Term:	Year:

List the course(s) with class meeting times below for which you desire approval (maximum of six credit hours) and include alternates (indicate alternates with an \*) in the event the preferred courses are not available:

# credit hours	Course Prefix & number	Course Title	Class meeting times	Last Date of Attendance	Signature of Instructor indicating Employee's academic eligibility

A third attempt repeat course is not eligible for the waiver.

Employee Certification: I certify that I am a full-time Florida Polytechnic University employee and understand that my supervisor must approve the times, as well as the courses in which I enroll. I acknowledge that the time I spend in connection with the courses is not time for which I will be paid for working. I acknowledge that if the class meeting times take place during my scheduled working hours, I must use annual or compensatory leave or take leave without pay for those work hours missed, subject to the approval of my supervisor. Enrollment in these courses affords me no student privileges unless I otherwise meet the criteria for such privileges. In addition, I understand that I am not permitted to use any state space, personnel, equipment, or supplies in conjunction with these courses, except as provided by the University as part of the course or program of instruction. I understand that the Employee Tuition Waiver Program may not cover all of my tuition and fees and it is my responsibility to guarantee all tuition and fees are paid by the payment deadline for the term. I acknowledge that any graduate-level tuition and fees above \$5,250 are taxable under Internal Revenue Code Section 127.

Employee's Signature:	Date:

Supervisor Certification: I certify that the above-named person is a full-time Florida Polytechnic University employee and that the time utilized by the employee in connection with the course(s) is not time for which the employee will be paid for working. I indicate my approval of the request for permission to register for the above stated courses at the times indicated by signing below.

Supervisor's Signature:

Date:

Date form submitted to HR: \_\_\_\_\_\_ HR Approved/Denied: \_\_\_\_\_



Tax Exemption for Employer Provided Assistance:

The value of any **undergraduate tuition and related fees** waived by the University on behalf of its employees is not taxable income, pursuant to Internal Revenue Code Section 117.

For **graduate tuition and related fees**, up to \$5,250 of graduate tuition and fees may be excluded from an employee's taxable income each calendar year, pursuant to Internal Revenue Code Section 127. If an employee's tuition and related fees waived by the University in a calendar year is greater than \$5,250, the difference will be included on the employee's W-2 as wages at the end of the calendar year.

FLORIDA	Employee Tuition Waiver Program
POLYTECHNIC	Assignment of Waiver Credits to Dependent Form
UNIVERSITY	Human Resources
	4700 Research Way, Lakeland, FL 33805-8531 863-874-8421
А	Application must be made each semester
This application is for the semes	ster, fiscal year
assign up to six (6) hours of their undergr semester to their dependents who meet	22 and University policies, <b>full-time Florida Polytechnic University employees</b> may raduate tuition hours per semester or up to three (3) graduate credit hours per academic requirements and are admitted to the University. <b>The Employee is</b> submitting the form to Human Resources prior to the fee payment deadline for
Employee's Full Name:	Job Title:
College/Department:	Email Address:
Employee ID#:	
I am assigning undergraduate tuition h above to my dependent who is the student na	nours (up to 6) or graduate tuition hours (up to 3) for the semester indicated amed below.
Student's Full Name:	
FPU Student #:	
hours indicated above for the semester indicat	<u>I-time Florida Polytechnic University employee,</u> and am assigning the number of tuition ted to the student named above. I certify that I am not and will not be enrolled at Florida red. I agree to provide, upon request, proof of dependency (IRS Form 1040).
Employee's Signature:	Date:
Date form submitted to HR:	HR Approved/Denied:

Date HR sent form to Financial Aid: \_\_\_\_\_\_ for final processing.

Form: 1.16.15