



EMPLOYEE TUITION WAIVER

Richard Bland College
of WILLIAM & MARY

GUIDELINES

ELIGIBILITY: The Employee Tuition Waiver Program is available only to eligible full-time and part-time employees. Eligible employees may elect to take up to two classes each term, not to exceed four classes per academic year (Fall, Spring, Summer). Each course may not exceed 4 credit hours. Course-related fees or charges other than (or in addition to) tuition are **not** subject to the waiver.

INSTRUCTIONS

1. Register for classes.
2. Complete Section A - Employee Information and Section B - Course Information.
3. Complete an [Application for VA In-State Tuition Privileges](#) if you meet the eligibility requirements for in-state tuition.
4. Obtain supervisor or department head approval in Section C - Departmental Approval.
5. Obtain approval from Human Resources – ESB Building, 2nd Floor (rbchr@rbc.edu)
6. HR will submit a copy of the COMPLETED form to the Business Office – ESB Building, 1st Floor

SECTION A

STUDENT INFORMATION

Name (Last) _____ (First) _____ (MI) _____ R- Number _____

Phone Number _____ Date of Birth: _____
mm/dd/yyyy

Department: _____ Office Phone: _____ E-mail: _____

I hereby certify that the information I have provided is true and complete to the best of my knowledge. I also agree not to exceed the class and credit hour limit per academic year, and I agree to abide by the student regulation and the Honor Code of the Richard Bland College of William and Mary while I am enrolled.

Employee Signature: _____ Date: _____

SECTION B**COURSE INFORMATION**

Semester: Fall Spring Summer *Year:* _____

Course Reference Number (CRN)	Course ID (Department, Course Number, Section)	Credit Hrs.	Class Day(s) & Time(s)	Instructor's Name

SECTION C**DEPARTMENTAL APPROVAL**

Departmental approval for the employee to enroll in the course listed above is granted via the employee's supervisor or the department head. Special restrictions for employees who will attend class during normal working hours must be determined by the employee and supervisor and stated below.

Supervisor's Printed Name _____ Office Phone _____

Departmental Approval _____ Date: _____
Signature of supervisor or department head

Restrictions: _____

SECTION D**HUMAN RESOURCE CERTIFICATION OF ELIGIBILITY**

A representative from the Office of Human Resources must sign this section to certify the employee is eligible for the Tuition Waiver Program. The original will remain in the employee's personnel file.

Name and Title of Human Resources Representative _____

Signature: _____ Date: _____

SECTION E**BUSINESS OFFICE – WAIVER PROCESSING**

A representative from the Business Office must receive a copy of the completed form for processing.

Date Received _____ Banner Updated _____ Code _____

Processed by: _____