



Texas Christian University Employee Tuition Assistance Application

Employees who work three-quarter time or more in regular positions are eligible for a maximum of six hours of free tuition for a fall or spring term and a maximum of six semester hours during any combination of summer terms. Employees may take a maximum of three semester hours during normal working hours with a supervisor's approval, provided the employee arranges to make up any time missed from work. Any exception must be approved by the unit head and human resources management. All classes must be taken for credit. Employees must apply each semester. For further information, refer to policy number 6.005. If you wish to apply for any other financial assistance, please contact the Office of Scholarships and Student Financial Aid. Recipients of the employee tuition benefit must maintain minimum satisfactory academic progress, as defined in the Finance section of the TCU Undergraduate Bulletin, to remain eligible for funding.

Employee Name		TCU ID Number		
Hire Date		Benefits Eligible?	Yes	No
Box Number		Extension	Department	

Enrollment Information

Who is the student? <input type="checkbox"/> Employee <input type="checkbox"/> Employee's Legal Spouse <input type="checkbox"/> Employee's Legal Dependent <input type="checkbox"/> Employee's Domestic Partner	How is the student admitted? <input type="checkbox"/> Admissions Office <input type="checkbox"/> Graduate Studies <input type="checkbox"/> Extended Education	What is the student's level? <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <i>(only employees and spouses are eligible – tuition benefit subject to tax withholding)</i>	What is the student's expected graduation date? Semester _____ Year _____
For which semesters are you requesting this benefit? Semester _____	Number of hours _____		
Which college or university is the student attending? _____ TCU _____ Other _____ Has the student previously completed a degree at TCU using this benefit? _____ Yes _____ No			

Course information *(complete only if employee is the student)*

Course Name		Credit hours		Times	
Course Name		Credit hours		Times	

Dependent Information *(If dependent is student)*

Name		TCU ID	
Birth Date		Date of First Enrollment at TCU	
Does the employee claim this dependent on his/her tax return? _____ Yes _____ No			

Spouse/Domestic Partner Information *(If spouse/domestic partner is student)*

Name		TCU ID	
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Authorizations

Employee's signature	Date	Supervisor's signature <i>(only if employee takes classes during work day)</i>	Date
Checklist	Award Letter	Human Resources	
Summer	Fall	Spring	Date

Sign & date completed form and forward original and two copies to Human Resources at TCU Box 298200. For more information, call Financial Aid at 257-7858 or for eligibility information regarding this employee benefit contact Human Resources at 257-5123.