CLARK ATLANTA UNIVERSITY
APPLICATION FOR TUITION REMISSION/WAIVER
(MUST COMPLETE EACH ACADEMIC YEAR)

POLICY GUIDELINES:

1. An employee must have one (1) year of continuous, full-time employment and meet the normal admissions standards to be eligible.
2. Employees and their dependents may be provided up to 100% tuition remission per semester -- 50% for a spouse.
3. The Remission/Waiver of Tuition is designed as a supplemental benefit intended to be applied after the eligible participant has applied for and received state and federal financial aid and grants/scholarships, therefore, participants must file a Financial Aid Application (FAFSA).
4. Eligible course studies include the pursuit of a bachelor's or master's degree. Continuing education, professional development and doctoral studies are not covered by this policy. This policy allows for the acquisition of only one degree.
5. There is no tuition remission/waiver for the summer session.

SECTION I – EMPLOYEE INFORMATION

Last Name	First Name	Social Security Number
Home Address	City/Zip	Home Telephone
Job Title	Department	Date of Hire

DEGREE: ☐ Undergraduate ☐ Graduate (Master's Only)

Planned Graduation Date:_____

Course of Study:_____

~ CAU EMPLOYEES MUST ATTEND CAU ~

SECTION II – SPOUSE/DEPENDENT INFORMATION
(INCLUDE ONLY THOSE APPLYING FOR BENEFIT)

Name of Spouse	Social Security Number	Date of Marriage	☐ 1st Time Applicant ☐ Continuing Applicant

DEGREE: ☐ Undergraduate ☐ Graduate (Master's Only)

Planned Graduation Date:_____

Course of Study:_____

~ SPOUSE MUST ATTEND CAU ~

Name of Dependent	Social Security Number	Date of Birth	☐ 1st Time Applicant ☐ Continuing Applicant

DEGREE: ☐ Undergraduate ☐ Graduate (Master's Only)

Planned Graduation Date:_____

Course of Study:_____

WILL ATTEND: ☐ CAU ☐ MOREHOUSE (Reciprocal Form Required) ☐ SPELMAN (Reciprocal Form Required)

I have attached one of the following documents (if not previously submitted) certifying the above individual(s) relationship to me:
☐ Marriage Certificate ☐ Birth Certificate ☐ Court Records ☐ Tax Forms

SECTION III – EMPLOYEE ACKNOWLEDGEMENT

MY SIGNATURE BELOW INDICATES THAT I AGREE TO ALL TERMS AND CONDITIONS OF THE TUITION REMISSION POLICY AS WELL AS ITEMS 1-4 BELOW:

1. None of the applicants for whom I am applying for this waiver have previously received a degree through this program.
2. I will remain in the employ of the University for two (2) years following the last date of attendance of my dependents, spouse or myself. If I voluntarily separate from the University within two (2) years of the completion of a course or degree program, I agree to refund the University the full amount of the tuition benefits received during the last two (2) semesters of attendance. The refund is due within three (3) months of separation.
3. I understand if I am involuntarily separated from the University, I (or my spouse/dependents) may be granted the privilege of completing the current semester, depending upon the circumstances of my termination. I also understand that if I am involuntarily separated for cause, I must refund the full amount of the tuition benefit received during the last two (2) semesters of attendance. The refund is due within three (3) months of separation.
4. I understand that falsification of any information and/or application documents will result in forfeiture of this benefit and I will be required to refund the University all tuition benefits awarded.

_____ _____ _____

Employee Signature Date Academic Year for Application

SECTION IV – APPROVALS

Supervisor/Manager	Index/Fund/Org# (REQUIRED)	Date
Dean/Department Head		Date
Human Resources		Date