TUITION ASSISTANCE
FOR EXTERNAL GRADUATE AND DOCTORAL PROGRAM APPLICATION

Employee’s Name: Click or tap here to enter text. Employee’s ID#: Click or tap here to enter text.

Employee’s Position and Title: Click or tap here to enter text. Employment Date: Click or tap here to enter text.

Institution to Attend: Click or tap here to enter text. Term/Year: Click or tap here to enter text.

Name of Graduate or Doctoral Program: Click or tap here to enter text.

Is this program available at Athens State University? [ ]  YES [ ]  NO

Indicate your understanding/affirmation of the information below by initialing each item and signing.

\_\_\_\_ The College/University I am attending is accredited.

\_\_\_\_\_ This program is directly related to my duties/position at the University.

\_\_\_\_ Tuition Waiver for graduate/doctoral courses will be allowed on a maximum of the current Athens State University graduate tuition rate (6 semester hours). Employee is responsible for the remaining portion.

\_\_\_\_ Written documentation of payment must be provided to the Business Office for reimbursement.

\_\_\_\_\_ Statement of Support must be provided to the Business Office for reimbursement.

\_\_\_\_ I have read and understand the continuing employment and repayment conditions.

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Employee Signature Date

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Supervisor Signature Date

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Dean/Director Signature Date

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Vice President Signature Date

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Human Resources Representative Date