

Tuition Waiver Form for SUNY Fredonia Courses  
UUP Represented Employees

Name:

Fredonia ID Number:

Address:

Payroll Title:

Campus of Employment:

Grade/Rank:

Course Information:

Semester	CRN	Subject/ Course # / Section	Title	Credits
<i>ex. Fall 2008</i>	<i>34583</i>	<i>Math 323 01</i>	<i>Partial Differential Equations</i>	<i>3</i>

Are you registered for any additional courses this semester?  Yes  No

Are you currently enrolled in a degree program at SUNY Fredonia?  Yes  No

If yes, what is your current program of study?

I hereby apply for a tuition waiver in accordance with benefits negotiated for UUP represented employees. I acknowledge that all fees are my responsibility at time of registration.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

Student and course registration eligibility verification, **Registrar's Office**, 1<sup>st</sup> floor Reed Library

\_\_\_\_\_  
**Signature of Registrar's Office/ Representative**

\_\_\_\_\_  
**Date**

Employment status verification, **Human Resources**, 5<sup>th</sup> floor Maytum Hall

\_\_\_\_\_  
**Signature of Human Resources Office/ Representative**

\_\_\_\_\_  
**Date**

**Applicant must obtain all required signatures, and submit original to the Office of Student Accounts, 3<sup>rd</sup> floor Maytum Hall, to receive the waiver of tuition.**