

**Employee Enrollment**  
Complete Sections I, II, III & V.  
**Spouse/ Dep. Enrollment**  
Complete Sections I, II, IV & V.



<p><b>Bursar's Use Only</b></p> <p>Course Level _____</p> <p>\$ Amount _____</p>
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**APPLICATION FOR WAIVER OF TUITION**  
(One Course per Waiver Application Form)

**Section I. Employee Information**

Employee  
Last Name \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ M Number \_\_\_\_\_

Dept \_\_\_\_\_ Job Title \_\_\_\_\_ Office Phone \_\_\_\_\_  Paid Monthly  
 Paid Bi-Weekly

Regular Employee  Retired Employee

**Section II. Course Information** (One course **ONLY** per form)  Dropped Class

5 digit CRN #	Subject	Course #	Course Title	Cr. Hrs.	Time	Day

This course is being taken for:  Undergraduate Credit  Graduate Credit  Specialist Credit  Doctoral Credit  Audit

Year \_\_\_\_\_  Summer II  Fall  Winter  Spring  Summer I  First ½ Semester  
 Second ½ Semester

**Section III. Employee Enrollment Information** (To be completed for employee enrollment only)

Classification:  Undergraduate Student  Graduate Student  Other \_\_\_\_\_

Enrollment in the selected course will not be scheduled during regular teaching or working hours.

Enrollment in the selected course will be scheduled during regular teaching or working hours and my supervisor agrees that I can make up time lost from work, provided I follow the schedule below:

**Section IV. Spouse/Dependent/Data** (To be completed for spouse/dependent enrollment only)

Last Name \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ M Number \_\_\_\_\_

Relationship to Employee \_\_\_\_\_  Claimed as dependent on my 2018 tax return

Date of Birth (Dependent Child Only) \_\_\_\_\_  Will claim on my 2019 tax return

Classification:  Undergraduate Student  Graduate Student  Other \_\_\_\_\_

**Section V. Employee Acknowledgement & Authorization** (To be completed for employee or spouse/dependent enrollment)

*As a Murray State employee, I understand the following:*

- This form MUST be approved by HR and the Bursar's Office on or before the last day to drop/add the class requested.**
- If Section IV is completed, I elect to transfer my waiver of tuition benefit to the above-named spouse/dependent and hereby certify that the above-named person meets the guidelines approved by the Board of Regents for eligibility for this benefit.*
- A course can only materialize if a sufficient number of tuition paying students enroll. The enrollment of tuition waiver employees will not be counted to determine if a course materializes. Tuition waivers may be restricted in some instances, even after this application has been approved.*
- The tuition waived by MSU may be a taxable benefit to graduate students. Tuition waivers may be reported as additional income, including applicable withholdings for the employee claiming the waiver. The value of some tuition waivers in excess of \$5,250.00 may be taxable to me. Waivers used by a spouse/dependent are taxable upon use.*
- I certify that the information provided on this form is true and accurate to the best of my knowledge.*

(1) \_\_\_\_\_ Date \_\_\_\_\_ (3) \_\_\_\_\_ Date \_\_\_\_\_  
Employee HR (Indicates employee eligibility only)

(2) \_\_\_\_\_ Date \_\_\_\_\_ (4) \_\_\_\_\_ Date \_\_\_\_\_  
Administrative Head of Dept Bursar's Office  
(For employee waiver only)