



Tuition Discount Request for Spouse and/or Dependent

Employee Name*: _____ **700#** _____

*Employee must be benefits-eligible (0.75 FTE or greater)

Student Name: _____ **700#** _____

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Spouse

I hereby affirm that the above student is my legal spouse as defined on Page 1 in the Employee Tuition Waiver and Spouse/Dependent Tuition Discount Policy. I will provide supporting required documents if not already available in the office of Human Resources.

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Dependent Child

To be eligible for tuition discount, the dependent child must under the age of 26. 'Child' includes a natural child, stepchild, child under court-ordered guardianship, adopted child, foster child and child of a civil union or domestic partner. A child is considered adopted if s/he is in the legal custody of the employee under an interim court order of adoption, whether or not a final adoption is ever issued. I will provide supporting required documents if not already available in the office of Human Resources.

Certification and Understanding

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I certify that all of the information stated above is true and correct in all respects.

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I understand and agree that Colorado Mesa University has the right to deny the tuition discount and/or impose discipline if any of the information on this Tuition Discount Request or as otherwise provided by me to the University is materially false, inaccurate, or misleading.

Date: _____

Signature

Benefit Approval:

Is employee benefits eligible? ____ Yes ____ No Dependent verification is on file? ____ Yes ____ No

Employee FTE ____ Payroll Org _____ Administrative ____ Classified ____ Faculty ____

HR/Payroll Signature _____ Date _____

Controller Signature: _____ Date _____