

**A separate Tuition Remission application must be made for each term.  
To avoid any delays in processing, please fill out the form completely.**

### EMPLOYEE INFORMATION

Name \_\_\_\_\_  
*Last* *First* *Middle Initial*

Employee ID Number \_\_\_\_\_ Employee Email \_\_\_\_\_

### ACADEMIC INFORMATION

What academic year is this request for? \_\_\_\_\_

What term is this request for? Check only one box.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Spring <b>Campus</b> | <input type="checkbox"/> Spring 1 <b>Online</b> (Bisk) | <input type="checkbox"/> Spring 2 <b>Online</b> (Bisk) |
| <input type="checkbox"/> Summer <b>Campus</b> | <input type="checkbox"/> Summer 1 <b>Online</b> (Bisk) | <input type="checkbox"/> Summer 2 <b>Online</b> (Bisk) |
| <input type="checkbox"/> Fall <b>Campus</b>   | <input type="checkbox"/> Fall 1 <b>Online</b> (Bisk)   | <input type="checkbox"/> Fall 2 <b>Online</b> (Bisk)   |

How many credits are you requesting for this term? \_\_\_\_\_

Is this degree program:

- Undergraduate     Graduate (please review the taxability of graduate tuition information on the HR website at [floridatech.edu/hr](http://floridatech.edu/hr))

I have read and understand the Florida Tech Tuition Benefits Policy and agree to abide by the policy. I agree to pay for all charges not covered by the policy and understand that the value of the benefit may be taxed and taxes withheld, as necessary, based upon applicable state and federal regulations.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

### APPROVALS

Department/Program Head \_\_\_\_\_ Date \_\_\_\_\_

Executive Vice President for Academics \_\_\_\_\_ Date \_\_\_\_\_  
*(ONLY for faculty, flight instructors and postdoctoral)*

Vice President/Dean \_\_\_\_\_ Date \_\_\_\_\_  
*(Signature required for more than 4 credits per term/6 credits per semester)*

Human Resources \_\_\_\_\_ Date \_\_\_\_\_

Credits Approved \_\_\_\_\_ Remission % \_\_\_\_\_