



Founded in 1872

**LANDER UNIVERSITY**

*Office of Human Resources*

## *Tuition Assistance Application*

Instructions: Application must be filled out completely, with appropriate signatures and returned to the Office of Human Resources prior to the beginning of the semester in which the course will be taken.

Name:

L Number:

Department:

Campus Phone Number:

Title of Position:

Employment Date:

### **ENROLLMENT INFORMATION**

I. Academic Term:       Fall 20\_\_     Spring 20\_\_     Summer 20\_\_

II. Tuition assistance may be provided for no more than six credit hours per academic term per employee.

Course Title:

Semester Hours:

Course No.:

Course Title:

Semester Hours:

Course No.:

III. NOTE: Lander University will coordinate tuition assistance with other educational or scholarship funds the student receives. The combination of tuition assistance, grants, and scholarships shall not exceed the cost of the tuition and fees for the approved course(s). In the event that grants and scholarships meet or exceed those costs, tuition assistance may not be awarded.

IV. Will any courses be taken during work hours?       Yes     No

If yes, how do you plan to make up time missed?

V. Employee Statement: Since the class(es) requested may or may not be available at the time of actual registration, I will discuss any change in classes with my supervisor and will submit a revised tuition assistance form indicating the changes in course or time. I also understand, in the event that I withdraw from or fail the course(s) taken, I will make arrangements to reimburse the institution for the cost of tuition assistance granted within 30 days. Failure to reimburse these costs will result in wage garnishment or other appropriate deductions from any compensation due to me.

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

\_\_\_\_\_  
Date

VI. Approval:

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Office of Financial Aid

\_\_\_\_\_  
Date

\_\_\_\_\_  
Office of Human Resources

\_\_\_\_\_  
Date