

Request for Employee Tuition Discount

This form must be completed in full to receive discount approval.

DEADLINE: LAST DAY OF REGULAR REGISTRATION FOR DISCOUNT SEMESTER.

First and Last Name:	Student ID #:
Employee SAP #:	Employee's Work Schedule (Days and Shift)
Employee Title:	Employee College/Division:
Employee Campus:	E-Mail address:
Designated employee home campus*:	Employee Phone #:
Enrollment requested at:	Academic Year:
<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer-Specify Session: _____	Major/Minor:
Number of credit hours enrolling this term:	Total credit hours completed to date:
Degree Program: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	
If Graduate degree, date accepted into program:	

*Employees with Regional Programs (AHEC) and Kids First sites located outside of Pulaski County may designate a campus. The designated campus shall remain the same for the term of employment unless the site of employment changes.

NOTE: Limitations exist on which courses/degrees/programs are eligible for discount.

Course Prefix	Course #	Course Name	**UALR CRN#	Credit Hours	Days and Times Of Class Meeting

**The CRN for each course is listed in the course schedule.

I certify that I am eligible under existing university policy for the tuition discount requested. I pledge that I shall not permit participation in this course to interfere with the performance of my regular duties. I understand that any change to my course schedule will require that I submit another tuition discount form for approval in order to avoid being administratively withdrawn.

Employee Signature

Date

I certify that the employee is full-time (100% appointed) and is eligible for the fee discount. I have reviewed and I approve the time (s) indicated for the above class (es).

Supervisor name (print)

Supervisor signature

Date

Dean/Director name (print)

Dean/Director signature

Date

**FAX COMPLETED FORM TO HUMAN RESOURCES AT 501-686-5386 or mail to Human Resources #564.
Human Resources will verify employment is 100% time and fax to appropriate campus.**

HUMAN RESOURCES USE ONLY:

I certify that the employee is **full-time (100% appointed)** and is **eligible** for this fee discount.

Approved: _____
Vice Chancellor and Provost (or Human Resources designee) _____
Date

Certification of Full-Time Employment by EMPLOYEE Campus: _____
Hours Approved: _____ Term: _____ Fall _____ Spring _____ Summer