

Vassar College  
Student Accounts  
Tuition Remission for Matriculated Students  
Attending Vassar College

Section #1:

Employee Information:

Name: \_\_\_\_\_ ID# \_\_\_\_\_  
(PRINT: LAST FIRST) SS# (last 4 digits) \_\_\_\_\_

Check One: \_\_\_ Admin \_\_\_ Faculty \_\_\_ Service \_\_\_ Staff

SECTION #2:

Student information:

Check One: \_\_\_ \*Dependent Child \_\_\_ Spouse \_\_\_ Domestic Partner  
Name: \_\_\_\_\_ ID# \_\_\_\_\_  
(PRINT: LAST FIRST) SS#(last 4 digits) \_\_\_\_\_  
\* Date of Birth: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

SECTION#3:

What term are you requesting this tuition remission for?

Check One: \_\_\_\_\_ Fall \_\_\_\_\_ Spring

This will be the (1st, 2nd, 3rd, etc.) \_\_\_\_\_ term for which I have received a tuition remission for my dependent child.

**NOTE: Employees who leave the college before the end of a semester for which they, or their dependents, are receiving benefits must reimburse the college on a pro-rate basis for the benefits received for that semester. Failure to drop a course within the add/drop period may result in your paying for the course.**

SECTION#4:

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

If you are interested in payroll deduction for your remaining balance, please see the Student and Employee Accounts Office

To be completed by Human Resources Department:

To: Student Accounts Department, Box 728  
From: Human Resources Department, Box 712

\_\_\_\_\_ is eligible for full tuition remission as a  
(Name of Student)  
matriculated student for the \_\_\_\_\_ semester/year.

\_\_\_\_\_  
HR Authorized Signature

FD1000/CC3013/SC /FuncS0  
Payroll Distribution Budget Number