



**APPLICATION FOR WAIVER OF TUITION FEES FOR
COURSES TAKEN AT TRENT UNIVERSITY**

OPSEU AND EXEMPT STAFF

TERMS OF POLICY

Rebates and Waivers of Tuition Fees will be provided subject to the terms and instructions outlined on the reverse side of this form.

The employee/applicant must be actively employed by Trent University at the start date of the course for the waiver to be valid. The employee/applicant will be subject to the policies and regulations as stated in the academic calendar.

EMPLOYEE/APPLICANT'S INFORMATION

Name _____
Department _____
Employee Number _____
Employee's E-Mail _____
Student Number _____

CREDIT COURSES – Registration Information

Program: Undergraduate Part-Time Graduate
Year _____ Term: Sept-Apr Sept-Dec Jan-Apr May-Aug

NOTE: Applicants are eligible for a waiver for one full course from September to April and one full course from May to August. A course is defined as 1.0 credit or 2 half credits.

Course Code(s) _____
Course Name(s) _____
Credit Value(s) _____

EXPLAIN HOW THE COURSE(S) ABOVE WILL BE OF BENEFIT TO THE EMPLOYEE IN THE PERFORMANCE OF HIS/HER JOB DUTIES AT TRENT UNIVERSITY

APPLICANT _____ Date _____
(Signature to certify the statement above is true)

DEPARTMENT HEAD _____ Date _____
(Signature to certify agreement with the statement above)

HUMAN RESOURCES DEPARTMENT _____ Date _____
(Signature to certify that employee is eligible for a tuition waiver benefit for the courses above)

ONLY APPLICANTS NOT APPROVED WILL BE CONTACTED