Application for Staff Council Tuition Assistance Program

_____ Semester _____ Year Tuition _____ or Portfolio Reimbursement _____ **(check one)**

PERSONAL INFORMATION

Name _____ WV Resident _____ Out-of-State Resident _____

WVU ID #_____ E-Mail _____

HOME ADDRESS _____

Home Phone # _____ Birth Date _____ Hours Worked Per Week _____

Campus Department _____ P O BOX _____ Work Phone # _____

EDUCATIONAL INFORMATION

Do you currently attend a college or university? Yes _____ No _____

If no, have you made application to a college or university? Yes _____ No _____

If yes, what institution do you attend? _____

If no, what institution do you plan to attend? _____

What program or major? _____

Current Grade Point Average _____ **(Refer to #8 in eligibility requirements.)**

Do you have a college degree? Yes _____ No _____

If yes, circle all that apply: Associate Bachelor Masters Ph.D.

Note: Degree information will be verified!!

Are you seeking assistance for a (1) (2) (3) or (4) credit hour class? **(circle one)**

CERTIFICATION

I certify that the above statements are true and I authorize Staff Council's Tuition Assistance Committee to make inquiries it deems necessary with this application. I understand this assistance is for obtaining the **first UNDERGRADUATE DEGREE** and confirms that I am not seeking assistance for credits toward a second undergraduate degree or graduate degree and that I am not a graduate student.

Applicant's Signature _____ **Date** _____

Endorsement of this request by the Supervisor, Dean or Director is required if the course is to be taken during the employee's regular working hours. Employees must adhere to the guidelines established by WVU policy on Educational Release Time. Please indicate N/A on the signature line if this section is not applicable to your class time.

Endorser's Signature _____ **Date** _____

PLEASE NOTE THE FOLLOWING ELIGIBILITY REQUIREMENTS AND ALSO NOTE THAT YOU CAN ONLY APPLY TWO SEMESTERS DURING AN ACADEMIC YEAR.