



Office of Human Resources
Graduate Program Tuition
Discount Request

Employee First Name EmployeeLast Name Colleague ID Date of Hire

Academic Year: 20\_\_ - 20\_\_

I have already earned a Graduate degree. Yes No

\*Please note when taking Graduate classes there may be additional fees that you will be responsible for as the student.

Table with 5 columns: Graduate Program, Course Title, Day/Time, Dates of Course, Credit Hours

Employee Declaration: I certify I have reviewed the Graduate Program Tuition Discount Program Policy and believe I qualify for the benefit according to the requirements outlined in the Policy. I also understand, if I leave Linfield University less than two years following the completion of the Graduate Degree program, I will be required to repay the University the full amount of any discount received under this program.

Employee Signature Date

Supervisor Approval (required if employee is taking classes that impact work schedule)

University policy states: "With supervisor's approval and appropriate arrangement to make up time away from the job, employees may attend classes for a maximum of five (5) hours each week during the employee's regular working hours."

Supervisor Name Supervisor Signature Date

Vice President Name Vice President Signature Date

For Office Use:

FTE: DOH: TYPE: AIDE: \$ DATE/INIT: FATR DATE/INIT: