Smart Medicine
STONY BROOK
UNIVERSITY HOSPITAL
Expert Care

UUP Employee Tuition Assistance Eligibility Form NW

Employee: All classes approved through the UUP Tuition Assistance Eligibility Form (waiver) are based on a "space available" concept. When space is available, employees may enroll in a course at a SUNY school on a tuition-free basis. The tuition waiver is provided to UUP-represented employees during each registration period, for credit-bearing courses ONLY. Only the tuition is waived. College fees, registration fees, technology fees, etc. are your responsibility and are not waived, nor reimbursed. One course may be waived each Fall and Spring semesters, and up to two Summer semesters as long as separate registrations are conducted and course dates do not overlap.

NAME: _____ Semester _____, 20____

Social Security Number:_____

Department Name: _____ Phone: _____

Official State Job Title: _____

Name of the SUNY school where you will be using this waiver: _____

COURSE REQUESTED:

|____|____|____|____|____|____|____|____|____| |_____| |_____|
Course abbreviation and number Section No. # Credits

COURSE TITLE: _____

MEETING TIME: (Day(s) and time(s):_____

EMPLOYEE SIGNATURE: _____

SUPERVISOR'S APPROVAL:

My signature below indicates that attendance in this course is not anticipated to interfere with the employee's professional obligation.

Signature: _____ Date: _____

OFFICE OF HUMAN RESOURCES: ☐ Eligibility Confirmed

Signature:_____ Date:_____

INSTRUCTIONS FOR USING THIS FORM:

This form is to be filled out, approved by your supervisor and the Human Resources Department, and submitted to the Student Accounts Office PRIOR to registering for the course. You must follow the school's registration process for UUP employees.

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