Tuition Waiver Form for SUNY Fredonia Courses UUP Represented Employees

Name:					
Fredonia ID Number:					
Address:					
Payroll Title:					
Campus of Employment:					
Grade/Rank:					

Course Information:

Semester	CRN	Subject/ Course # / Section	Title	Credits		
ex. Fall 2008	34583	Math 323 01	Partial Differential Equations	3		
Are you registered for any additional courses this semester?						
Are you currently enrolled in a degree program at SUNY Fredonia?						
If yes, what is your current program of study?						
I hereby apply for a tuition waiver in accordance with benefits negotiated for UUP represented employees. I acknowledge that all fees are my responsibility at time of registration.						
Signature of App	licant	Date				
Student and course registration eligibility verification, Registrar's Office, 1 st floor Maytum Hall						
Signature of Reg	istrar's Office/	Date				
Employment status verification, Human Resources, 5 th floor Maytum Hall						
Signature of Hum	an Resources	Date				

Applicant must obtain all required signatures, and submit original to the Office of Student Accounts, 3rd floor Maytum Hall, to receive the waiver of tuition.