



Graduate Assistant Application for Tuition Waiver

Semester _____ Academic Year _____

INSTRUCTIONS. This form should ONLY be submitted if you are attending a SUNY school OTHER THAN Fredonia. If you are attending Fredonia your tuition waiver will automatically be applied to your bill. Please fill out this form and have it signed by your faculty sponsor (the faculty member you have been assigned to work with) then send the form to Student Accounts. The signed form can be scanned and emailed to student.accounts@fredonia.edu OR it can be delivered to Student Accounts in 306 Maytum Hall.

Last Name _____ First Name _____ Fredonia ID _____
 Address _____ City _____ State _____ Zip _____
 Phone Number _____ Email Address _____

Terms of Appointment	
Stipend Per Academic Year	_____
Number of Credits Registered For	_____
Maximum Hours per Week of Duties	_____

Tuition-Waived Courses (must not exceed awarded credit hours)		
Course Number	Course Title	Credit Hours

Signatures

Graduate Assistant Signature _____ Date: _____
 Faculty Supervisor Signature _____ Date: _____
 Student Accounts Signature _____ Date: _____

Approved _____ Denied _____