



**Instructions:**

- Complete this form & obtain appropriate approvals each semester
- Review the *PO Tuition Discount* policy and the policy of the affiliate college you are attending
- Return completed form to Human Resources at least one month **PRIOR** to the start of the course

**Tuition Discount Request Form**

**Employee Information**

Name: \_\_\_\_\_ SSN (Last 4 #'s): \_\_\_\_\_ Dept.: \_\_\_\_\_

Loc.: \_\_\_\_\_ Status:  FT  PT Hours per Week: \_\_\_\_\_ Title: \_\_\_\_\_

**Attending School Information**

**School/Program Attending**

Term: \_\_\_\_\_ Yr: \_\_\_\_\_ School/Program: \_\_\_\_\_

Degree: \_\_\_\_\_

**Course Information**

Course Title	Start Date	End Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Units: \_\_\_\_\_

**Taxable Income Option:**

*Waived tuition exceeding \$5,250 in a calendar year must be considered taxable income and reflected on your paychecks accordingly. The taxable will be divided over four pay periods, starting four to six weeks after the end of the add/drop period for the semester.*

**Employee Signature:** *I certify that I am eligible for the tuition discount for myself for the current semester listed above. I have read and understood the Pacific Oaks Tuition Discount policy. Tuition costs waived over the IRS limit will be treated as taxable income under IRS regulation. I agree to take full responsibility for tuition charges should the request be found ineligible.*

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Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

**Signatures (TO BE OBTAINED BY EMPLOYEE)**

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Supervisor (Print Name) \_\_\_\_\_ Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

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HR Representative (Print Name) \_\_\_\_\_ Human Resources Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR HR USE ONLY:**

Approved  Disapproved Reason for Disapproval: \_\_\_\_\_ Date Processed: \_\_\_\_\_ Signature of Processor: \_\_\_\_\_