

CAMERON UNIVERSITY Employee Academic Tuition Waiver Request

Semester _____

1. Name _____ Cameron ID# _____ Dept. _____
2. Job Title _____ Total Credit Hours _____
3. Employee's Regular Work Schedule _____
4. Employee Certifies he/she is a Resident of Oklahoma Yes No

Course Number	Prefix	Class Time Schedule	Days	Tuition Waiver Amount

Employee's Revised Work Schedule, (if course is scheduled during employee's regular work hours): _____

Employee Signature	Date
Supervisor's Signature	Date
Business Office Signature	Date

Upon satisfactory completion of the course(s), a 100% tuition waiver will be granted to full-time, regular employees up to a maximum of six (6) credit hours for the Fall and Spring Semesters and three (3) credit hours for the Summer session. Three-quarter time and part-time employees' tuition waiver is prorated to match their employment status. Mandatory student fees are not included. An employee may take up to one three (3) credit hour course during scheduled work hours with the supervisor's approval. If a class is taken during an employee's scheduled work hours, either the employee's Revised Work Schedule section documenting how the time will be made up or an annual leave form must be completed and submitted. Employees must bring a class schedule with this completed form to the Business Office.

***Initial** _____ I understand and agree that my employer, Cameron University, may deduct from my pay amounts owed due to the above courses in the event any amount remains unpaid 15 days after the end of the semester or if my employment at Cameron University ends and fees are still due the University.