

TUITION WAIVER FOR CONCORDIA UNIVERSITY CREDIT COURSES



EMPLOYEE:

Family Name	First Name	Employee I.D. No.
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Select Tuition Waiver being requested for

EMPLOYEE SPOUSE (IF APPLICABLE) CHILD (IF APPLICABLE)

Family Name	First Name	Student I.D.
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Indicate if Student is Full-Time Part-Time

Academic Term : Summer Fall Year : 20 _____
 Winter Year : 20 _____

CHECK THE BOX(S) COVERING THE ABOVE EMPLOYEE'S CURRENT BARGAINING UNIT

<input checked="" type="checkbox"/>	NAME OF EMPLOYEE GROUP	CONDITIONS
<input type="checkbox"/>	C.U.F.A. Concordia University Full-time Faculty Association	A, C
<input type="checkbox"/>	C.U.P.F.A. Concordia University Part-time Faculty Association (21 credits or more)	A, B, D, F
<input type="checkbox"/>	A.C.U.M.A.E. Association of Concordia University Management Employees	A, B, H
<input type="checkbox"/>	STTMC - Sir George Williams (CSN)	A, C, H
<input type="checkbox"/>	STTMC - Loyola (CSN)	A, C
<input type="checkbox"/>	C.A.R.E. Concordia Association of Research Employees Contract > 12mths or more or Employees who are appointed on an indeterminate term in accordance with clause 17.05	B
<input type="checkbox"/>	C.U.U.S.S.T.S. Concordia University Union of Support Staff - Technical Sector	A, C, H
<input type="checkbox"/>	C.U.P.E.U. Concordia University Professional Employees Union (Contract > year)	A, B, H
<input type="checkbox"/>	C.U.L.E.U. Concordia University (Webster & Vanier) Library Employees Unions	A, C, H
<input type="checkbox"/>	POLICY (HR-26) Contract > 1 year	A, C
<input type="checkbox"/>	C.U.S.S.U. Concordia University Support Staff Union	A, B, H
<input type="checkbox"/>	C.U.C.E.P.T.F.U. Concordia University Continuing Education Part-Time Faculty Union (with 6 years or 1120 hours of Service at the Center)	C, D, E, F, G

CONDITIONS

A	Includes Spouse and financially dependent children of a retiree	E	Spouse or dependent enrolled at time of employee's retirement, may complete such program with waiver
B	Includes spouse and dependents	F	Maximum of 2 family members including the employee per academic year
C	Includes Spouse and financially dependent children	G	Maximum of 30 Credits per academic year
D	Copy of most recent seniority list required	H	Permanent Part-Time members are eligible for waiver at a pro-rated amount

TUITION WAIVER FOR CONCORDIA UNIVERSITY

CREDIT COURSES



Note 1: A separate application for tuition waiver form must be completed and authorized for each individual wishing to enroll under the Tuition Waiver Policy. A new form must be completed for each academic year.

Note 2: This application for tuition waiver form is not valid unless received via a **service request form**. You are required to send the form using the **service request form** in order for us to authenticate the request.

Exception: Pensioners are to email the completed form to hr-reception@concordia.ca as inactive employees are not granted access to the service request form.

Note 3: Upon the processing of this form, a credit for the tuition amount will appear on the student's account. All additional fees will not be reimbursed by the University.

DECLARATION:

By completing and submitting the tuition waiver document via the service request form, I confirm that I am applying for a waiver of tuition fees in accordance with the University Policy, or collective agreement or protocol which governs my employ. I hereby acknowledge that, in the event that I leave the employ of the University while I, my spouse or any of my dependents are enrolled in a course(s) for which the tuition fees have been waived, I become responsible for the prorated amount of the tuition fees waived. I also hereby consent to have the prorated amount of the tuition fees for which I am responsible deducted from my final pay cheque if it is not otherwise paid. If applicable: I hereby declare that the individual I have stated as my dependent or spouse, is true according to its definition stated in my employee group's agreement and any falsification will result in automatic extinction of my tuition waiver benefits.