PAINE COLLEGE

Office of Financial Aid
1235 Fifteenth Street Augusta, GA 30901-3182

Telephone: 706-821-8262 1-800-476-7703
Fax: 706-821-8691

2010 - 2011
DEPENDENT TUITION WAIVER
FALL SEMESTER

Paine College will provide fully paid tuition to academically qualified dependents of regular, full-time employees, employed for one full year (12 months), when verification of dependent status is presented and approved. The waiver is contingent on the student maintaining satisfactory academic progress, completing the Free Application for Federal Student Aid (FAFSA), and approval by the Vice President of Administrative and Fiscal Affairs. The waiver is not valid for tuition overloads or student fees.

Reference the reverse side regarding dependent status as defined by the U.S. Department of Education.

PLEASE PRINT OR TYPE.

EMPLOYEE INFORMATION

Employee Name: _____
Last *First* *MI*

SSN: _____ *ID#:* _____

Department: _____ *Position:* _____

DEPENDENT INFORMATION

Student Name: _____
Last *First* *MI*

SSN: _____ *ID#:* _____

Relationship to Employee: _____ *Date of Birth:* _____

I certify that the student listed above is my dependent as defined by the U.S. Department of Education and is eligible to receive the Dependent Tuition Waiver benefit based on my employee status with Paine College for this semester. I understand that falsification of this information could result in disciplinary action and/or dismissal.

_____ _____
Employee Signature *Date*

_____ _____
Vice President of Administrative and Fiscal Affairs Signature *Date*