Montana Tech Authorization for Faculty & Staff Fee Waiver

Complete the information below to apply for the Faculty & Staff Tuition Waiver for courses at Montana Tech. Signatures must be obtained from the employing campus. If attending classes at other than Montana Tech, please complete that school's Waiver Application.

Name Date

Department Employee ID

- Tuition may be waived, with the approval of the Department Chair/Supervisor and Human Resources, for permanent University System employees who are employed at least ¾ time (.75 FTE) during the entire semester. Student, temporary, seasonal or fixed term employees are not eligible to receive this waiver.
- If employment is terminated prior to the end of the term, the waiver will be revoked and the employee responsible for all costs associated with enrollment.
- Employees must re-apply for a waiver each semester of enrollment.
- Employees who utilize this tuition waiver are not eligible to use the Dependent Tuition Waiver for the same academic term (regardless of campus attending).
- Completed form must be submitted no later than the 15th day of class. Retroactive waivers will not be honored.
- Tuition waivers are granted for the first six (6) credit hours per fall and spring semester and first four (4) credit hours during summer semester.
- Fees are not waived.
- **A class should not be taken during scheduled work time if it is also offered before or after scheduled work time.**

Employee Date

Course #	Credits	Course Description	Time	Days

Semester (choose one): Spring ☐ Fall ☐ Summer ☐ Academic Year _____

☐ **Approved: Time must be made up**

- Employees taking courses during normal duty hours are **required** to make up time.
- Please indicate how and when the hours will be made up: Make-up time may not include breaks.

☐ **Class outside of regular work schedule**

☐ **Not approved**

Supervisor Date

Administrative Action ---- ☐ **Approved** ☐ **Not Approved**

HRS Info: Employee's FTE _____

Human Resources Director Date

☐ **Approved** ☐ **Not Approved**

Director of Financial Aid Date

If you are employed on a campus other than Montana Tech please have the HR office complete:

HR Info: Employee's FTE _____

Name **Signature**

Campus Employed at _____

Date