



### BOULDER Faculty/Staff Tuition Waiver Benefit Form - Dependents

- ✓ This Faculty/Staff Tuition Waiver Benefit form is the application for a 10% tuition discount for dependents of eligible Boulder and System campus employees. This form IS NOT the student application to enroll for courses.
- ✓ You must follow [all posted deadlines and policies](#) to utilize the tuition waiver benefit and the student must be admitted to the Boulder campus. A separate form must be submitted for each semester and dependent.
- ✓ The benefit can no longer be split between the employee and their dependent(s). If the employee chooses to transfer the benefit to their dependent(s) then the employee waives the right to use the benefit for himself or herself for the remainder of the academic year and vice versa.
- ✓ (If application is for dependent) I have attached the appropriate [dependent verification documentation](#) if this dependent has not been verified for any other CU benefits.

#### SECTION 1: FACULTY/STAFF INFORMATION

EmployeeType: <input type="checkbox"/> Faculty <input type="checkbox"/> Staff	Campus of Employment:
Employee ID:	CU Department Name:
Last Name:	CU Department Number:
First Name:	CU Phone Number:
M.I.:	E-mail:
% Appointment:	

#### SECTION 2: DEPENDENT INFORMATION (if waiver is for dependent)

I, as the faculty or staff member, am authorizing my dependent (listed below) to use my tuition waiver benefit (one application per dependent) for undergraduate or graduate courses and waive my right to the benefit for the entire academic year.

Dependent Student ID/Date of Birth:
Dependent Last Name:
Dependent First Name:
Dependent Email:
Relationship to Employee:
Campus of Registration:
Term: <i>ex) Fall 2013</i>

#### If this form is for a dependent child:

Is the child eligible to be claimed as a dependent on the employee's U.S. Individual Income Tax Return for the current calendar year for which tuition assistance is requested?

- Yes  No  Not Applicable

**If this form is for a Same Gender Domestic Partner (SGDP)/civil union partner or child thereof:**

Is the SGDP/civil union partner or child thereof eligible to be claimed as a dependent on the employee's U.S. Individual Income Tax Return for the current calendar year for which tuition assistance is requested?

Yes  No  Not Applicable

*Any spouse, SGDP/civil union partner, dependent, or employee who knowingly provides false, incomplete, or misleading facts or information on this form for the purpose of attempting to defraud the University hereto commits a fraudulent act. Any such person will be subject to civil and/or criminal penalties, fines, denial of any or all of the University's benefits, or as provided in applicable regulations, statutes, and written directives.*

*I provide this information to be used by the University for the sole purpose of determining eligibility of the above immediate family member for the tuition benefit. This information will be used solely for the administration of these benefits and filed within Employee Services. I understand that availability of these benefits is based on eligibility requirement and subject to any future changes in program provisions.*

*I certify that signing this form serves as confirmation that I meet the criteria outlined in the [Employee Services Procedural Statement](#). I have read and understood the Tuition Waiver Benefit program guidelines. I am aware that tuition benefits for an SGDP, dependent children of an SGDP and dependent children that cannot be claimed on the U.S. Individual Income Tax Return are currently subject to taxation.*

**SECTION 3: IMPORTANT INFORMATION**

**College Opportunity Fund:**

Undergraduate faculty, staff and dependents who are Colorado residents must apply for the College Opportunity Fund (COF) with Colorado's College Assist program: <https://cof.college-assist.org>. Once registered, COF needs to be authorized through the Student Self Service Portal to apply towards the student's bill. If the student does not apply for COF nor authorize it, the student will be responsible for paying the COF benefit amount.

**Registration:**

Dependents are now allowed to enroll prior to the first day of the semester and can be full-time. The student is responsible for fees and any non-waived tuition. Any remaining balance is due by the posted deadline. For additional information and exceptions, please refer to the [Administrative Policy Statement: Tuition Assistance Benefit](#).

**Tax Impact of the Tuition Waiver Benefit:**

Per IRS policy, the taxation of the waived tuition will be reported on the employee's Form W-2 as wages, subject to applicable income tax withholding and payroll taxes. For more information on taxation, please refer to the "Billings, Fees and Costs" section of our [Frequently Asked Questions](#).

**SECTION 4: FACULTY/STAFF SIGNATURE**

✓ By providing my handwritten signature below, I attest that I (as a CU faculty or staff member) have read and understand the terms and conditions of this benefit.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

✓ Submit this form completed to Employee Services  
Email: [tuitionbenefit@cu.edu](mailto:tuitionbenefit@cu.edu) (preferred) or Fax: 303-860-4299