RETIREE TUITION GRANT PROGRAM

Criteria for Eligibility:

1. Employees who retire with a minimum of twenty (20) years of full-time employment with the College shall be eligible for continued tuition benefits for up to twelve (12) credits per semester for a maximum of 62 credits or the number of credits required to fulfill an Associates Degree of a declared major.

2. IRS-eligible dependents of retired full-time persons shall be eligible for tuition benefits for courses for up to twelve (12) credits per semester for a maximum of sixty-two (62) credits.

3. Tuition grants for retirees and their IRS-eligible dependents will include the cost of tuition only. It does not include fees or other related costs.

4. A 2.0 grade point average (GPA) must be maintained within each course. Retirees or Dependents who fail to earn a 2.0 GPA or complete the class will be required to reimburse the College for all costs of their enrollment.

5. Should the student drop any course(s) beyond the full refund date, for any reason, they will be responsible for repayment to the college for the incurred tuition and fees to the college.

6. Human Resources will review the student’s grades at the end of each semester to determine if any repayment to the College is due.

7. I understand and agree to abide by all requirements for participation in the Retiree Tuition Grant Program.

Retiree Name: ___________________________________ MID ID#: __________________

Retiree Email Address: _________________________________________________________

Semester Start Date:   ____________________ Total Credit Hours Requested:   __________________

Class: ____________________________   Section: __________________ # of Credit Hours:  ________

Class: ____________________________   Section: __________________ # of Credit Hours:  ________

Class: ____________________________   Section: __________________ # of Credit Hours:  ________

Class: ____________________________   Section: __________________ # of Credit Hours:  ________

I understand and agree to abide by all requirements for participation in the Retiree Tuition Grant Program:

Retiree Signature: __________________________________ Date: __________________
To be completed by the Retiree’s Dependent:

Dependent Name: _______________________________  MID ID#: __________

Dependent Mid Email Address: _______________________________

Semester Start Date: _____________________  Total Credit Hours Requested: ______________

Class: ____________________________  Section: __________________  # of Credit Hours: ______

Class: ____________________________  Section: __________________  # of Credit Hours: ______

Class: ____________________________  Section: __________________  # of Credit Hours: ______

Class: ____________________________  Section: __________________  # of Credit Hours: ______

I understand and agree to abide by all requirements for participation in the Retiree Tuition Grant Program:

Retiree’s Dependent Signature: _______________________________  Date: ______________

HUMAN RESOURCES OFFICE USE ONLY

Verification of course completion:

Did the student withdraw from the course?  YES   NO

Was the withdraw date from the course after the 100% refund date?  YES   NO

Did the student receive a 2.0 GPA or less in any course?  YES   NO

HR Comments:

HR Approval Signature: _______________________________  Date: ______________