

**TUITION REIMBURSEMENT APPLICATION  
FOR CHILDREN OR SPOUSE OF NON-TEACHING PROFESSIONAL (EXEMPT)  
CALENDAR YEAR \_\_\_\_\_**

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1. Semester and year for which you are registering tuition assistance:

Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ (Fill in year and circle)

2. Name of Student \_\_\_\_\_

3. Student Social Security Number: \_\_\_\_\_

4. Employee Name: \_\_\_\_\_

5. Number of matriculated credit hours registered:

Spring \_\_\_\_\_; Summer \_\_\_\_\_; Fall \_\_\_\_\_; Intersession \_\_\_\_\_

6. Net tuition and academic fees (lab/computer) balance by semester:

Spring \_\_\_\_\_; Summer \_\_\_\_\_; Fall \_\_\_\_\_; Intersession \_\_\_\_\_

7. Did you complete a federal financial aid application "Free Application for Federal Student Aid"?

Yes \_\_\_\_\_ No \_\_\_\_\_

Were you awarded PELL/SEOG? Yes \_\_\_\_\_ No \_\_\_\_\_

Spring \_\_\_\_\_; Summer \_\_\_\_\_; Fall \_\_\_\_\_; Intersession \_\_\_\_\_

8. Did you complete and file the required state forms and file to determine your TAP eligibility or part-time aid eligibility?

Yes \_\_\_\_\_ No \_\_\_\_\_

Were you awarded TAP? Yes \_\_\_\_\_ No \_\_\_\_\_

Spring \_\_\_\_\_; Summer \_\_\_\_\_; Fall \_\_\_\_\_; Intersession \_\_\_\_\_

9. Did you complete and file the required College forms and file for HVCC scholarships?

Yes \_\_\_\_\_ No \_\_\_\_\_

Scholarship award received (calendar year \_\_\_\_\_):

Scholarship name \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Scholarship name \_\_\_\_\_

Amount: \$ \_\_\_\_\_

10. When completing your federal/state tax return for calendar year \_\_\_\_\_, did you receive a credit for tuition that was deducted from your federal/state tax liability? Yes \_\_\_\_\_ No \_\_\_\_\_ AMOUNT OF CREDIT? \$ \_\_\_\_\_

If no, was it because you were not eligible for the credit? Yes \_\_\_\_\_ No \_\_\_\_\_

**DEADLINE DATE FOR COMPLETION OF TUITION REIMBURSEMENT APPLICATION FORM: MAY 1<sup>ST</sup> OF THE YEAR  
FOLLOWING THE SEMESTER TO BE CLAIMED FOR REIMBURSEMENT**

I affirm under penalty of perjury that \_\_\_\_\_ is my son/daughter/spouse and by my signature, I also affirm that all information I have provided on this application form is true and correct.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

Office Use Only: Net tuition balance calculation