

Student Number:

File Number:	

## TUITION REMISSION FOR EXEMPT EMPLOYEES

## NOTE THAT THIS APPROVAL PROCESS WILL START THE DAY AFTER THE COURSE STARTS

Please reference Article 10-10.2 on Page 14 from your Administration Staff Employment and Benefit Program for more information related to your tuition remission

Employee Name:

Spouse / Dependent Full Name:		
Verification of Social Insurance Number of Spouse/Dep Human Resources will contact you if required. <b>Please</b> of		
COURSE INFORMATION		
Course Name:		
Dates of Course:	Tuition Amount*:	* Tuition Amount Only. Does NOT include books, Student Union, Activity or any other fees. Ensure top part is fully completed and your Course Statement is attached. This will ensure no delays in processing.
PLEASE CHOOSE ONE:		
Credit to Student Account		
Refund Requested (if course has already been pai	d in full)	
(Tuition Remission is a taxable benefit, as such the tuition Spouses and/or dependents will receive a T4A for their cour		4 for tax purposes.
REQUESTED BY:		
Employee	Date	Signature
APPROVAL BY:		
Supervisor	Date	Signature
	OFFICE USE ON	LY
1 0 1 0 5 3 1  APPROVAL BY:	1 1 0 7 3 3	6 Partial Remission:\$
Human Resources Advisor and/or HR Designate	- Date	Signature