



Faculty/Staff Request to Enroll in University Courses

APPLICATION

I have read and understand the instructions and information provided on the reverse side of this application.

Term _____ Year _____

Name _____ Employee ID: _____
(Print)

Institution attending: _____

Table with 5 columns: Course #, Credits, Course Description, Time, Days. Includes four rows of blank lines for entry.

My status will be: ___ undergraduate degree ___ graduate degree
(Check only one) ___ undergraduate non-degree ___ graduate non-degree
___ post-bachelor's

I hereby authorize the Payroll Office to withhold from my final paycheck the value of this fee waiver in the event I terminate my employment prior to completion of the course(s) for which I have been granted the waiver.

Your Signature _____ Date _____
Department _____ Phone _____

APPROVAL SIGNATURES REQUIRED:

Supervisor Signature _____ Date _____

The supervisor's signature indicates that the employee has agreed to make up the time missed from work and has arranged a satisfactory schedule to do so with the supervisor. It also indicates that the employee has passed his/her union probationary period, if necessary.

Dean/CEO Signature _____ Date _____

Director of Human Resources _____ Date _____

Financial Aid Action: Entered on date _____ Other aid? YES NO Initials _____

Helena College University of Montana

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INSTRUCTION QUALIFICATIONS & ELIGIBILITY:

The Montana Board of Regents has authorized The University of Montana to grant fee waivers to employees under certain conditions. You may qualify if you meet the conditions of the MUS Board policy and Helena College University of Montana which include:

- Being a permanent employee (.75 FTE or greater) during registration, fee payment, and throughout the period of enrollment
- Completing any union probationary period of employment, if required, before filing an application
- Faculty whose assignment is .75 FTE or greater in their second consecutive semester of employment.
- Enrolling in a regular University course (fee waivers do not apply to courses offered through Continuing Education)
- Obtaining approval with signatures of the supervisor and director/dean (when an employee wishes to take a course that is offered only during regularly scheduled work hours, the employee must obtain supervisor and Dean/CEO approval. An employee must take annual leave or approved leave without pay for all hours absent from the regular work schedule or make up the time absent from work).

DELIVER THIS COMPLETED FORM, INCLUDING ALL SIGNATURES FROM YOUR DEPARTMENT AND THE HUMAN RESOURCES OFFICE, TO THE FINANCIAL AID OFFICE A MINIMUM OF TWO DAYS PRIOR TO YOUR FEE PAYMENT

OTHER INFORMATION:

The faculty/staff fee waiver waives the in-state, incidental fee only. (All other fees are the responsibility of you, the student.) Any federal aid may be reduced as a result of fee waivers