

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	Name Emp				oyee ID:			
(print)								
Institution	attending:							
Course #	Credits	Course Description			Time	Days		
(Check only one)		undergraduate degree graduate degree undergraduate non-degree graduate non-degree post-bachelor's						
=	terminate my	yroll Office to withhold fro employment prior to comp	=					
Your Signat	ure				Date			
Department								
APPROVAL	SIGNATURES	REQUIRED:						
Supervisor	Signature				Date			
work and h	as arranged a	e indicates that the employ satisfactory schedule to do her union probationary pe	so with t	the supervisor.	It also indicates			
Dean/CEO Signature)ate			
Director of Human Resources Other aid? YES N								
Financial Ai		ered on date	Other	aid? YES NO Ir	nitials	_		

Helena College University of Montana

Faculty/Staff Request to Enroll in University Courses -

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