



Employee Spouse/Dependent Tuition Waiver Application

APPLICATION DEADLINE: This application must be completed and submitted to Bismarck State College Human Resources 10 days prior to the start of the term. Applications submitted after the term ends will not be accepted.

APPLICATION GUIDELINES:

- A new application must be submitted each term.
- Spouse/Dependents are responsible for registering for classes through the regular admission/registration procedures.
- This is a 50% tuition waiver that applies to the North Dakota Resident tuition rate only.
- Please refer to the [SBHE policy 820](#) and [NDUS Procedures 820.1](#) for definition of Dependent and the examples of required documentation to provide to prove "Spouse" or "Dependent" status.
- BSC Employees should submit directly to BSC Human Resources after signature. NDUS or CTS Employees are required to have their Human Resource department sign and date this document prior to submitting to BSC Human Resources.

EMPLOYEE INFORMATION:

Employee Name: _____ EMPLID: _____

Campus Email: _____ Phone: _____

Department (examples, BSC, NDUS, or CTS): _____

SPOUSE/DEPENDENT INFORMATION:

Spouse/Dependent Name: _____ Spouse/Dependent ID: _____

Spouse Please provide a copy of marriage license. Must be legally married as recognized by the state of North Dakota. (Please refer to [NDCC 14-03-01](#))

Dependent Please provide current supporting documentation showing Dependent status. Dependent must be under the age of 26 in order to be eligible for waiver. Acceptable documentation includes one of the following: Financial Aid Report, **NDUS** Health Insurance Documentation, or a current year Tax Transcript from the IRS.

Dependent Relationship to Employee: _____ Dependent Date of Birth: _____
MM/DD/YYYY

SEMESTER TO BE APPLIED:

Year: _____ Term (Select One): _____

By clicking Submit, I understand that this waiver will be approved only if I, the employee and my spouse/dependent, are in good financial standing (no past due balance with Student Finance Department) and the value of this waiver may be taxable income to the employee and the waiver amount received by the spouse/dependent will be disclosed on the employee's annual benefit statement.

Employee Signature: _____ Date: _____

A Signature in the box below indicates Benefitted Employee Status has been verified by appropriate Human Resource department from either Bismarck State College or the North Dakota University System or NDUS Core Technology Services:

Human Resources Approval/Coordination

The above spouse/dependent is eligible to receive a 50% waiver of tuition for BSC classes (excluding self-supporting, Distance and Continuing Education courses that require tuition to be paid to the site for student placement) based on benefitted status of above employee.

Bismarck State College/NDUS/CTS Human Resources Approval Signature and Date: _____

Student Finance Approval Signature and Date: _____