

Application for Education Benefit Scholarship – Dependent Child

Before completing this request form, it is important for you to read the Education Benefits Policy including the definition of a dependent child. Complete the information below and forward this form and required attachments to Human Resources (CMB 1064 or benefits@pugetsound.edu).

Name of Faculty/Staff Member: _____ Department: _____

STUDENT INFORMATION

Name of Student: _____ Last 4 of SSN _____ Student ID _____

Address (Street / City / State / Zip): _____

Birthdate (mm/dd/yyyy): _____ Phone (###-###-####): _____ Email: _____

Check all applicable boxes for the term(s) for which you are requesting a scholarship. You are required to submit a new application each year (for Tuition Remission and TE Scholarships) or each term (for NWLA or Open Tuition scholarships).

☐ Summer Term 20____ ☐ Fall Term 20____ ☐ Spring Term 20____ ☐ Other - please specify: _____

☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

Please indicate below the scholarship program(s) for which this application is being submitted.

☐ **TUITION REMISSION SCHOLARSHIP AT PUGET SOUND**

☐ **NATIONAL TUITION EXCHANGE (TE) SCHOLARSHIP**

A list of participating colleges and universities is available on the TE website (www.tuitionexchange.org). Specify below the institution(s) to which your dependent child is applying for a TE scholarship:

☐ **NORTHWEST LIBERAL ARTS (NWLA) TUITION SCHOLARSHIP***

☐ Lewis & Clark College ☐ Reed College ☐ Whitman College ☐ Willamette University

☐ Check here to confirm student is enrolled as full-time, degree-seeking student at the institution attended

* Must be a dependent child of faculty or staff member hired on or before July 1, 2012 to be eligible. Maximum benefit amount is 75% of Puget Sound's tuition.

☐ **OPEN TUITION SCHOLARSHIP**

Name of accredited college/university: _____

☐ Check here to confirm student is enrolled as full-time, degree-seeking student at the institution attended

Tuition amount listed on attached invoice: \$ _____

Maximum annual scholarship amount based on length of service as of July 1st of the academic school year \$ _____

Please refer to the important deadlines and required attachments listed on the next page.

IMPORTANT APPLICATION DEADLINES

Tuition Remission

- New scholarship applications for freshman dependents will need to be submitted no later than February, prior to the academic year your child will be enrolled. This will ensure an accurate financial aid package.
- Tuition Remission Scholarship applications for employee and/or spouse will need to be submitted at least a month before the beginning of the semester you are applying for.

National Tuition Exchange Scholarship

- Check the Tuition Exchange website for the due dates for applications for the university your dependent would like to attend.

NWLA Tuition Scholarships and Open Tuition Scholarships

- Submit a new scholarship application prior to each quarter/semester. Allow at least two weeks for processing time. If approved, the allowable scholarship amount will be mailed directly to the college/university attended. Scholarships will not be paid directly to the student or faculty/staff member.

REQUIRED ATTACHMENTS

☐ If you are applying for new education benefits for the dependent child of your domestic partner, please attach an **Affidavit of Marriage or Domestic Partnership Form**.

☐ If you are applying for a Northwest Liberal Arts Tuition Scholarship or an Open Tuition Scholarship, please attach a detailed invoice for the quarter/semester being requested. The invoice should contain all of the following information:

- ☐ Full name of student
- ☐ Name and mailing address of college or university
- ☐ Quarter/semester in question (e.g. Spring 2020)
- ☐ Confirmation that student is full-time, degree seeking student
- ☐ Full tuition amount for that quarter/semester (invoice must be itemized and specifically state amount of tuition)

STATEMENT OF UNDERSTANDING

I am applying for the dependent child tuition scholarship(s) as indicated above. I understand that if there is any question or concern about the information provided on this form, Human Resources can request IRS verification of dependency status of the dependent child receiving education benefits. I understand that, if the college determines that my dependent does not meet the eligibility criteria to which I am certifying, the scholarship will be rescinded.

Faculty/Staff Member Signature: _____ Date: _____

For Human Resources Use Only

Full-Time Equivalency (FTE): _____ Employment Status: ☐ Regular Faculty/Staff ☐ Adjunct/Temporary Staff

Student has received benefits equivalent to _____ of coursework (8 semester/12 quarter/34 unit maximum) through _____ Term.

Date of hire/rehire: _____ Years of Service: _____

Student is eligible to apply for the following scholarships:

Tuition Remission at Puget Sound: ☐ Yes (5+ years of service)

National Tuition Exchange: ☐ Yes (5+ years of service)

NWLA Tuition Scholarship: ☐ Yes (5+ years of service)

Amount of NWLA tuition scholarship: \$ _____

Open Tuition Scholarship: ☐ Yes (5+ years of service)

Amount of open tuition scholarship: \$ _____

Comments/notes:

- ☐ FC100
- ☐ SC100
- ☐ RC100

Authorized Signature: _____ Date: _____