## CALVIN COLLEGE APPLICATION FOR TUITION WAIVER FOR THE SPOUSE OF A FULL-TIME CALVIN COLLEGE EMPLOYEE

Spouse Name:	Calvin ID #:
Calvin Employee Name:	
Home Address:	
Phone Number:	_
This is an application for:1 <sup>st</sup> Interin	m2 <sup>nd</sup> Summer semester, 20
Course Name:	Number of Credit Hours:
laboratory courses, workshop courses, an granted to the spouse of a full-time emploregisters for the course during the late recourses per academic year (generally one  B. TUITION WAIVER REQUEST  I am the spouse of a full-time employed charge.  I am the spouse of a full-time employed courses are charge.  C. SUBMISSION OF TUITION WAIVER REQUEST  Applications for spouse tuition waivers in the spouse of a full-time employed courses are considered.	aployee and want to audit the class at Calvin College free of apployee and want to take a class at Calvin College for half-price.  REQUEST  must be submitted within the semester that the class is being ed. Incomplete forms will not be processed and will be returned
Signature	Date
Registrar's signature	Date
Director of Human Resources' signature	