University of Kentucky, Employee Education Program (EEP) Form

(THIS FORM IS FOR UTILIZATION BY EMPLOYEES OF INSTITUTIONS OTHER THAN THE UNIVERSITY OF KENTUCKY)
DO NOT COMPLETE THIS FORM IF YOU ARE A UK EMPLOYEE
Would you like to share your EEP experiences and success with us? If so, please visit us online at http://www.uky.edu/HR/benefits/eep

COMPLETED FORMS MAY BE SUBMITTED VIA FAX AT (859) 323-8494 or IN PERSON AT SCOVELL HALL. FOR QUESTIONS REGARDING YOUR FORM PLEASE CALL (859) 257-8772.

STUDENT INFORMATION

Last Name _____ First Name_____ M.I._____ SSN_____-_____-_____

Emp. ID#_____ Dept. #_____ Dept. Name_____Contact # (____) _____-_____

Email Address _____ Level of Study: Undergraduate / Graduate *(Please circle one)*

I certify that I am not applying for a waiver of more than 6 hours per semester from this institution or a combination of institutions and that the information provided on this form is true and correct to the best of my knowledge. I have read and understand the University of Kentucky policy pertaining to the Employee Education Program and that graduate level tuition waiver amounts that exceed $5250.00 for the calendar year are subject to taxation as imputed income.

_____   _____/_____/_____
(Employee Signature)   *(Date)*

SEMESTER
(only 1 semester per form)
Year _____

☐Fall
☐Spring
☐Winter
☐Summer 1
☐Summer 2

EMPLOYING INSTITUTION AUTHORIZATION

Employing Institution _____   Contact # (_____) _____ - _____

Personnel Official_____   Title _____

I certify that the above named student is a regular full-time employee and is eligible to receive the tuition waiver for the semester indicated.

_____   _____/_____/_____
(Personnel Official Signature)   *(Date)*

COURSE SCHEDULE

Please submit an amended form should any changes take place, such as dropping or adding a class**.** Refer to University Policy 51.1.1.2 if enrolled in more than 6 credit hours – "The maximum number of credit hours for which tuition will be waived shall be no more than eight (8) per semester, not to exceed two classes, with a maximum of eighteen (18) credit hours per academic year." (The increase of the maximum of 6 hrs per semester applies **only** to UK employees taking classes at UK. It does not apply to any other college or university.)

COURSE NAME	NUMBER/SECTION	DAYS CLASS MEETS	TIME	CREDITS
_____	_____/_____	_____	_____	_____
_____	_____/_____	_____	_____	_____
_____	_____/_____	_____	_____	_____
_____	_____/_____	_____	_____	_____

For Office Use Only

AID ID: _____   AID AMT: $_____   _____   _____/_____/_____
                                                                        (Signature-Employee Benefits Rep.)   *(Date)*

Revision 10/13/2009