## PENSACOLA STATE COLLEGE

#### FINANCIAL AID/VETERAN SERVICES/SCHOLARSHIPS

# State Employee Tuition Waiver Program 2012-2013

Florida law allows Pensacola State College to waive tuition and fees for State employees of the executive, legislative, and judicial branches of State government for up to six credit hours per term, on a space-available basis. All other charges/fees (application fee, lab fee, distance learning fees, textbooks, etc.) are the student's responsibility. Students must be awarded a grade for the course attempted.

Eligible State employees must present the State Employee Tuition Waiver Request Form, signed by the employee's supervisor, to the Financial Aid/Scholarships Office. Eligible state employees may obtain a form from the Financial Aid/ Scholarships Office on the Pensacola, Milton, or Warrington campus. Also, the waiver form may be downloaded from the following website: <a href="http://www.pensacolastate.edu/students/studentFormsApps.asp">http://www.pensacolastate.edu/students/studentFormsApps.asp</a>

For first-time PENSACOLA STATE COLLEGE students, you must complete the college admissions process by submitting an Admissions Application to the PENSACOLA STATE COLLEGE Admissions Office and paying the one-time application fee.

Follow the steps listed below to activate your use of the State Employee Waiver:

- 1. You must complete the State Employee Tuition Waiver form and have it signed by your supervisor. Submit the completed and signed form to the PENSACOLA STATE COLLEGE Financial Aid/Veteran Services/Scholarship Office. To avoid delays, you may submit the form in one of three ways:
  - a. Fax the completed form to: (850) 484-2181
  - b. Mail the completed form to:

Financial Aid/Veteran Services/Scholarships Pensacola State College 1000 College Blvd. Pensacola, FL 32504

- c. Drop off the completed form at the Financial Aid/Veteran Services/Scholarship Office at any one of the three campus locations.
- 2. You **must** register for classes during the State Employee registration period listed below.

If you choose to register and/or pay fees to hold a seat in a class prior to the date available to use this waiver, you will forfeit eligibility for the waiver.

#### **Fall or Spring Term Registration**

Session A	third day of schedule adjustment period
Session B	third day of schedule adjustment period
Session C	second day of schedule adjustment period
Session D	second day of schedule adjustment period

#### **Summer Term Registration**

Session A	first day of schedule adjustment period
Session B	first day of schedule adjustment period
Session C	first day of schedule adjustment period
Session D	first day of schedule adjustment period

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# State Employee Tuition Waiver Program

(Intent to Enroll at Pensacola State College) 2012-2013

By completing this form you are notifying the institution of your intent to enroll at Pensacola State College. You will still need to complete the appropriate forms for admission and registration at the institution.

Employee Name			Employee SSN*				
Agency			Agency Telephone #				
Division			Bureau				
Address of Agency			City, State, Zip				
Agency Email Address			Term of Enrollment (check only one)  □ Fall □ Spring □ Summer				
COURSES FOR WHICH REGISTRATION IS REQUESTED							
Indica	te Section number, Course	e number, Cours	se Title, and the number	r of credit hours for each.			
		ourses: two pref	erred and two alternate	courses			
	tion # Course #		Course Title		Credit Hours		
Preferred							
Preferred							
Alternate Alternate							
<ul> <li>♦ My waiver of tuition and fees will apply to no more than six credit hours per term.</li> <li>♦ I must register for classes during the State Employee registration period prescribed by the state or community college that I plan to attend.</li> <li>♦ All other charges/fees (application fee, lab fees, distance learning fees, textbooks, etc.) are my responsibility.</li> <li>♦ My ability to secure the course I request depends on space availability.</li> <li>Student Signature</li></ul>							
Agency Authorization I authorize the above-named employee to participate in the State Employee Tuition Waiver Program. I also certify that the above-named employee holds an established position with a full-time equivalency (FTE).  Printed name and title of Supervisor:							
	-						
Signature of Supervisor:							
Printed name and title of Agency Head (or designee):							
Signature of Agency Head (or designee):							
Financial Aid/Votovan Savvigos/Scholarchine Office Use Only							
Financial Aid/Veteran Services/Scholarships Office Use Only  Amount input for specified term (college credits \$92.70 + \$25 late fee)							
\$	Amount input for s		·	\$78.80 + \$25 late fee)			
Waiver Account Numbe #1-81200-00-0020-68005	Sequence Numb		Year / Term	Data Entry Operat	tor Date		