

**Hamilton College**  
**Request for Tuition Waiver**

I request that tuition be waived for my enrollment in the following course:

Course Title: \_\_\_\_\_

Audit                         Credit  

Semester and year \_\_\_\_\_

Class meeting time \_\_\_\_\_

I have permission to be released from my normal job responsibilities at the above times and understand that I will not be paid for time spent in class or otherwise devoted to the course.

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Employee Signature*

\_\_\_\_\_  
*Supervisor of Department Head Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

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**To Be Completed By Human Resources**

Eligibility for tuition waiver confirmed for above period of study. \_\_\_\_\_% of tuition is to be waived.

*(100% of tuition is waived for one course during regular work hours for all benefited employees.)*

Confirmed by \_\_\_\_\_  
Associate Director, Human Resources

\_\_\_\_\_  
Date

cc: Financial Aid Office