

**NORTHERN MAINE COMMUNITY COLLEGE**

**TUITION WAIVER REQUEST FOR FAMILY MEMBERS OF NMCC EMPLOYEES**

Date: \_\_\_\_\_

Tuition waivers shall be extended to dependent children of NMCC employees who are accepted as students in full-time programs through the normal admissions process. Dependent children of part-time staff and faculty shall be eligible for tuition waivers on a prorated basis. In addition, a tuition waiver for a spouse shall be made available on a space available basis with no longer than one (1) year delay beyond the regular application process. Each dependent child/spouse of an employee shall be eligible for tuition waivers not to exceed two (2) years of full-time course work.

**This form must be completed by the employee at the beginning of each semester.**

Student's name: \_\_\_\_\_

Address: \_\_\_\_\_

Employee's name: \_\_\_\_\_

Relationship of student to employee:

If part-time employee, indicate the number of hours worked per week: \_\_\_\_\_

**Please be sure to circle yes or no**

Was the student claimed as a dependent for the previous year's income tax return? Yes or No

Will the student be claimed as a dependent for the present's year's income tax return? Yes or No

This request is for the Fall \_\_\_\_\_ Spring \_\_\_\_\_ semester of \_\_\_\_\_  
Academic Year

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**OFFICE USE ONLY  
APPROVAL**

Credit Hours carried \_\_\_\_\_

Amount of tuition waived: \_\_\_\_\_ for Fall or Spring (Circle one)

Academic Dean \_\_\_\_\_

Dean of Students \_\_\_\_\_

Director of Finance \_\_\_\_\_