



CUNY EMPLOYEE TUITION FEE WAIVER

(COLLEGE TO ATTEND)

(SEMESTER)

THIS WAIVER APPLIES ONLY TO TUITION FEES. NON-INSTRUCTIONAL FEES AND STUDENT ACTIVITY FEES ARE NOT WAIVED. THIS WAIVER IS VALID ONLY FOR THE SEMESTER INDICATED ABOVE, AT THE COLLEGE INDICATED ABOVE. PLEASE SEE REVERSE SIDE FOR SERVICE REQUIREMENTS, SUMMER SESSION APPLICABILITY, AND SUPERSCRIPIT REFERENCE DOCUMENTS.

This is to certify that _____
is currently employed at _____ College
in the title of _____, title code # _____, date of
appointment _____ and may be considered for a tuition waiver as follows:

FULL-TIME INSTRUCTIONAL TITLES (Teaching and Non Teaching) ^(1,2)
(Includes Classified Managerial Titles)

_____ Undergraduate courses _____ Graduate courses (6 credits maximum)

ADJUNCT TEACHING TITLES ⁽²⁾

_____ One (1) course, may be undergraduate or graduate

FULL-TIME CLASSIFIED TITLES (Civil Service)

Gittleson ⁽³⁾:

_____ Undergraduate courses _____ Graduate courses (6 credits maximum)

White Collar (Other than Gittleson) ⁽³⁾:

_____ Undergraduate courses _____ Graduate courses (3 credits maximum)

Blue Collar (Custodial, Stores, and Security) ⁽⁴⁾:

_____ Undergraduate courses _____ Graduate courses (3 credits maximum)

Skilled Trades (Section 220) ⁽¹⁾:

_____ Undergraduate courses only

My signature provides consent for the disclosure of my class registration and attendance records at any unit of The City University of New York to university and college administrators responsible for my employment and work performance. The purpose of this disclosure is to ensure that my time and leave records accurately reflect those authorized classes attended during working hours. My signature also signifies my understanding that under Internal Revenue Code Sec 127, the tuition assistance that I receive shall be reportable as wages and subject to withholding if the benefit exceeds the \$5,250 threshold and is for non job-related undergraduate or graduate level courses that do not meet the working condition fringe benefit exclusion.

Signature of Employee Date Address: _____
SS#: _____

A. College of Employment: _____

(College HR Director / Designee, signature) Date: _____

(Print Name and Title)

MANAGEMENT CERTIFICATION

Undergraduate and Graduate Level Course(s) Above the \$5,250 Threshold
Job Related or Meets The "Working Condition Fringe Benefit" Exclusion

TO BE COMPLETED BY EMPLOYEE:

Employee Name: _____ College of Employment: _____

Title Name & Code Number: _____ College of Enrollment: _____

Undergraduate Course
Name & Number: _____
Course Description: _____
How is it job related? _____

Graduate Course
Name & Number: _____
Course Description: _____
How is it job related? _____

Undergraduate Course
Name & Number: _____
Course Description: _____
How is it job related? _____

Graduate Course
Name & Number: _____
Course Description: _____
How is it job related? _____

I attest to the accuracy of all the information given.

Employee Signature & Date: _____

TO BE COMPLETED BY MANAGEMENT REPRESENTATIVE:

Undergraduate Course
Name & Number: _____
Taxable []Yes []No
If not, how is it job related? _____

If not, how does it meet the working condition
exclusion? _____

Graduate Course
Name & Number: _____
Taxable []Yes []No
If not, how is it job related? _____

If not, how does it meet the working condition
exclusion? _____

Undergraduate Course
Name & Number: _____
Taxable []Yes []No
If not, how is it job related? _____

If not, how does it meet the working condition
exclusion? _____

Graduate Course
Name & Number: _____
Taxable []Yes []No
If not, how is it job related? _____

If not, how does it meet the working condition
exclusion? _____

Signature & Date: _____

Name & Title: _____
Designated Management Representative

TO BE COMPLETED BY COLLEGE OF EMPLOYMENT

Signature & Date: _____

Name & Title: _____
HR Director / Designee

<u>Employee Category</u>	<u>Service Requirements</u>	<u>Course Type and Credit Limits</u>	<u>Summer Session</u>
Instructional Staff	1 year - undergraduate / none - graduate	Undergraduate - no limit / Graduate - 6 credits	no
Classified Managerial	1 year - undergraduate / none - graduate	Undergraduate - no limit / Graduate - 6 credits	no
Adjunct Teaching Titles	10 consecutive semesters	1 course - may be undergraduate or graduate	no
Gittleson Titles	6 months	Undergraduate - no limit / Graduate - 6 credits	yes - undergraduate only
Classified White Collar	1 year	Undergraduate - no limit / Graduate - 3 credits	yes - undergraduate only
Classified Blue collar	1 year	Undergraduate - no limit / Graduate - 3 credits	yes - undergraduate only
Skilled Trades	1 year	Undergraduate only - no limit	yes

REFERENCES

1. Board of Trustees Resolution, Cal No. 7, January 28, 1980
2. CUNY-PSC Agreement, Article 29
3. CUNY Non-instructional Clerical, Administrative, and Professional Employees Agreement, Article V
4. CUNY Custodial, Stores-stock, and Security Employees Agreement, Article V

B. College of Enrollment

Certification of enrollment

College: _____

(course name & number)

(course name & number)

Tuition Fee Total: \$ _____

Registrar / Designee Name

Registrar / Designee Signature

C. College of Employment HR Office

Reviewed by: _____
HR Director / Designee

Date

[] No Payroll Action Necessary

[] Forwarded to Payroll Office for Action

Date sent to Payroll Office

D. College of Employment Payroll Office

Signature of Payroll Officer / Designee

Date Processed

* Please forward the completed form to the HR Director at your College, who will forward to HR Director at College of Employment.