Faculty/Staff Request to Enroll in University Courses

APPLICATION
I have read and understand the instructions and information provided on the reverse side of this application.

Term___________ Year _________

Name__________________________________ Employee ID: ___________________________
(print)

Institution attending:______________________________________________________________

<table>
<thead>
<tr>
<th>Course #</th>
<th>Credits</th>
<th>Course Description</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

My status will be:  _____ undergraduate degree  _____ graduate degree
(Check only one)     _____ undergraduate non-degree  _____ graduate non-degree
                        _____ post-bachelor’s

I hereby authorize the Payroll Office to withhold from my final paycheck the value of this fee waiver in the event I terminate my employment prior to completion of the course(s) for which I have been granted the waiver.

Your Signature ___________________________________________ Date ________________

Department ______________________________________________ Phone ________________

APPROVAL SIGNATURES REQUIRED:

Supervisor Signature ___________________________________________ Date ______________

The supervisor’s signature indicates that the employee has agreed to make up the time missed from work and has arranged a satisfactory schedule to do so with the supervisor. It also indicates that the employee has passed his/her union probationary period, if necessary.

Dean/CEO Signature ___________________________________________ Date ______________

Director of Human Resources _______________________________________ Date ______________

Financial Aid Action:  Entered on date ____________ Other aid? YES NO Initials _________

Revised 11/26/11
Helena College University of Montana

Faculty/Staff Request to Enroll in University Courses –

**INSTRUCTION QUALIFICATIONS & ELIGIBILITY:**
The Montana Board of Regents has authorized The University of Montana to grant fee waivers to employees under certain conditions. You may qualify if you meet the conditions of the MUS Board policy and Helena College University of Montana which include:

- Being a permanent employee (.75 FTE or greater) during registration, fee payment, and throughout the period of enrollment
- Completing any union probationary period of employment, if required, before filing an application
- Faculty whose assignment is .75 FTE or greater in their second consecutive semester of employment.
- Enrolling in a regular University course (fee waivers do not apply to courses offered through Continuing Education)
- Obtaining approval with signatures of the supervisor and director/dean (when an employee wishes to take a course that is offered only during regularly scheduled work hours, the employee must obtain supervisor and Dean/CEO approval. An employee must take annual leave or approved leave without pay for all hours absent from the regular work schedule or make up the time absent from work).

DELIVER THIS COMPLETED FORM, INCLUDING ALL SIGNATURES FROM YOUR DEPARTMENT AND THE HUMAN RESOURCES OFFICE, TO THE FINANCIAL AID OFFICE A MINIMUM OF TWO DAYS PRIOR TO YOUR FEE PAYMENT

**OTHER INFORMATION:**
The faculty/staff fee waiver waives the in-state, incidental fee only. (All other fees are the responsibility of you, the student.) Any federal aid may be reduced as a result of fee waivers