**Benefits Administration signature** 

## TUITION ASSISTANCE APPLICATION—ROTC/HEBREW UNION EMPLOYEE

Return via email to uschr@us	sc.edu				
Year:	Semester:	Fall Spring	Summer		
Employee name		Campus ph	one	Email	
 Job title		Cahaal /daw	a vet va a vet		
See TUITION ASSISTANCE FOR	P EMDI OVEES webpage at h	School/dep		anlovees/	
NOTICE: Tuition assistance ov	ver \$5250 per calendar year	r is taxable income to the er	nployee for all non-jo		ourses. If you are
enrolled in a graduate course  Degree program	e, complete the GRADUATE	COURSEWORK CERTIFICATI	ON.		
5 , 5					
Course number	Course title	☐ G ☐ UG			Units
Course number	Course title	☐ G ☐ UG			Units
School/department ap	proval				
Hebrew Union authorized	I signer name (print)		Phone		
Signature			Date		
PPD authorized signer na		Phone			
Signature		Date			
I am responsible for immedia assistance was applied to any status changed during the sei university's academic calenda which I am registered meets of	y ineligible tuition or fees. I mester(s) in which tuition a ar at http://www.usc.edu/o	Immediate payment is also assistance was used (the fire academics/calendar/). I am	required if a post-reg st and last day of clas	gistration audit reveals sses in any semester/	s that my employment session is defined by the
I certify the above information misrepresentation may result			s of my use of the be	nefit. I understand th	at misuse or
Employee signature			Date		
FOR OFFICE USE ONLY					

Date