REQUEST FOR EXEMPTION FROM NON-RESIDENT TUITION
FOR GRADUATE RESEARCH/TEACHING ASSISTANTS
Employed by a Texas Institution of Higher Education

Note: The employing department should submit this form directly to the
Student Business Services Office on behalf of the student.

Semester [ ] Fall [ ] Spring [ ] Summer
Year 2017

Employee's Name ___________________________ Student ID # ___________________________

Job Title ___________________________ Job Code number ___________________________

CERTIFICATION OF EMPLOYING DEPARTMENT: I certify that the above named person is or will be employed by my department for the semester indicated above in a qualifying position as listed overleaf and meets all of the following requirements:

(1) is in a teaching or research position;
(2) is employed at least one-half time (20 hours per week);
(3) has a beginning employment date on or before the 12th class day (fall and spring terms);
   *4th class day (summer term); and an ending employment date no earlier than the last official class day (last day of finals);
(4) is in a position that relates to his/her degree program.

*Note: Student using waiver in summer term do not have to work during the part of summer term that they are utilizing this waiver; however, they must be employed during a complete part of a summer term.

I agree to notify the Student Business Services Office immediately should any of the employment conditions change for this employee.

Signature of Dept Head ___________________________ Phone/Email ___________________________

Employing Dept: Computer Science
Date ___________________________

CERTIFICATION OF STUDENT EMPLOYEE: I certify that I am now or will be employed by Texas State University in a qualifying position (by a Texas Institution of Higher Education) as listed overleaf. I understand and meet the employment requirements as outlined in the certification of employing department above. I agree to notify the Student Business Services Office immediately should any of my employment conditions change.

Furthermore, I understand that the employment status, on which this request is based, is subject to audit. If it should be determined that the employment is not the type for which an exemption should have been granted, I will pay the required non-resident tuition immediately. Non-payment may result in cancellation of my registration.

Signature of Student Employee ___________________________ Date ___________________________

If this exemption from non-resident tuition is requested for the spouse or child of the employee, list that person's name and Texas State ID number below:

NOTE:
To receive credit for the exemption, this form MUST be returned to the Student Business Services Office, JCK 188, not later than the 12th class day of the Fall/Spring semesters or the 4th class day of the Summer semesters.

*****Forms received after the 12th or 4th class day deadlines WILL NOT be honored.*****

Revised September 2015