

UNIVERSITY OF ARKANSAS EMPLOYEE REQUEST FOR FEE DISCOUNT (all fields required)

Employee Name: _____ Email Address: _____ Hire Date: _____
 University ID: _____ Requesting Term: Fall Spring Summer Requesting Year: _____
 Student Status: NON-DEGREE SEEKING JUNIOR Student Campus: UAF UAPB UACCB UA
FRESHMAN SENIOR UAFS UAM UACCM Grantham
SOPHOMORE GRADUATE UALR UACCH UACCRM Pulaski
UAMS PCCUA CCCUA Tech

I HAVE A BACHELOR'S DEGREE OR HIGHER FROM ANY INSTITUTION: YES NO

COURSE NAME	COURSE NUMBER	CREDIT HOURS	DAYS & TIMES

I certify that I am currently serving the University of Arkansas on 100% appointment as of the final day of regular registration for the term this discount is requested, and that I have been continuously serving the University in a full-time position for one complete fall or spring semester prior to this term. I certify that I have read and agree to the specifications listed in [Board Policy 440.1](#) and [Fayetteville Policy 512.0](#). I understand that a discount will not be applied to my account until I have completed the Release of Student Information authorization form. **I understand that if I fail to complete this form and pay the remaining balance due on my student account by the tuition and fee due date that I will be subject to late fees. Per IRS code section 127, you will be taxed for tuition waiver benefits over \$5,250 per year.**

Employee Signature: _____ Date: _____

_____ Workday Employee ID* Campus Address Department Code Campus Phone

TO BE COMPLETED BY THE EMPLOYEE'S SUPERVISOR	
I certify that the employee is currently serving the University of Arkansas on 100% appointment, that any release granted during the employee's regular working hours does not exceed one five-hour course (Fall and Spring) or one three-hour course (Summer). I certify that if the employee is taking an intersession course, they are using annual leave to cover the hours away from work. I also certify that I have read and agree to the specifications listed in Board Policy 440.1 , Fayetteville Policy 512.0 and the explanation above.	
Immediate Supervisor/Dean or Dept. Head: _____	Date: _____

TREASURER'S OFFICE USE ONLY		
_____	_____	_____
Company	Signature	Date

FINANCIAL AID OFFICE USE ONLY			
Employee Institutional Scholarship			Amount
	Fall/Spring	901100270030	_____
	Summer	901200270030	_____

*Access Workday through the Workday App Located at myapps.microsoft.com and login with your university credentials. Search for Workday or scroll down the page until you see the Workday App. In the Workday App, click on the cloud icon in the upper right-hand corner and click 'View Profile' under your name. Under 'Job Details' you will see your Workday Employee ID.