

**Instructions: The following information must be completed by the student, and sent to the Office of Student Financial Aid where the student will be attending. For addresses, see attachment. PLEASE PRINT.**

**PART A:**

Student Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ University ID #: \_\_\_\_\_

Street Address: \_\_\_\_\_ Local Phone #: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_ Academic Term: FA \_\_\_\_\_ SP \_\_\_\_\_ SU1 \_\_\_\_\_ SU2 \_\_\_\_\_

This application is for the 50% Child of Employee Tuition Waiver to be used at: \_\_\_\_\_  
(Name of University)

Major: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

**PART B:**

**Have you used the 50% Child of Employee Tuition Waiver benefit at any campus of the following universities?**

Chicago State University, Eastern Illinois University, Governors State University, Illinois State University, Northeastern Illinois University, Northern Illinois University, Southern Illinois University, University of Illinois, or Western Illinois University.

**YES** If "Yes," complete the following PART C.

**NO** If "No," proceed to PART D.

**PART C:**

**University academic terms during which the 50% tuition waiver benefit was utilized:**

Name of University: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Name of University: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Name of University: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Name of University: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Name of University: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Name of University: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Name of University: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Name of University: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

**PART D:**

I hereby declare that all previous or concurrent academic terms, during which the 50% Child of Employee Tuition Waiver benefit was utilized, are accurately accounted for above. I request and understand that this information may be verified by means of accessing university records and that the total 50% Child of Employee Tuition Waiver benefits granted to me may not exceed the 4-year limitation established in P.A. 90-0282. A separate "Tuition Waiver Benefit Utilization Record" (B.U.R.) must be completed by the student where he/she is currently enrolled, pursuant to P.A. 90-0282.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY:** 50% tuition waiver benefit utilization record confirmation (optional as requested by the tuition waiver granting institution): In accordance with institutional standards for tuition waiver benefit utilization, the record outlined above is correct.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized signature of record confirmation by the Financial Aid Office

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### University of Illinois at Chicago

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**Staff and Academic Employee Contact:**

Academic Human Resources/Records  
400 HRB, 715 South Wood, MC-900  
Chicago, IL 60612  
(312) 996-6355 | Fax (312) 996-1803

**Student Contact:**

Student Financial Aid Office  
1800 SSB, MC-334  
Chicago, IL 60607  
(312) 996-3126 | Fax (312) 996-3385  
<http://www.uic.edu/depts/financialaid/>

**Faculty Employee Contact:**

Faculty Affairs (HR)  
1235 S. Halsted Street, Suite 303, MC-095  
Chicago, IL 60607-5023  
(312) 355-2412

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### University of Illinois at Springfield

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**Employee Contact:**

Office of Human Resources  
One University Plaza MS HRB 30  
Springfield, IL 62703-5407  
(217) 206-6652 | Fax (217) 206-7145  
<http://www.uis.edu/humanresources>

**Student Contact:**

Office of Financial Assistance  
One University Plaza MS UHB 1015  
Springfield, IL 62703-5407  
(217) 206-6724 | Fax (217) 206-7376  
<http://www.uis.edu/financialaid/>

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### University of Illinois at Urbana-Champaign

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**Staff Employee Contact:**

Staff Human Resources  
52 East Gregory MC-562  
Champaign, IL 61820  
(217) 333-2142 | Fax (217) 244-7304

**Student Contact:**

Office of Student Financial Aid  
620 East John Street, MC-303  
Champaign, IL 61820  
(217) 333-0100 | Fax (217) 265-5516  
<http://www.osfa.uiuc.edu>

**Faculty and Academic Employee Contact:**

Academic Human Resources  
807 S. Wright Street – Suite 420, MC-310  
Champaign, IL 61820  
(217) 333-6747 | Fax (217) 333-4019