

_____ ID@_____

_____ By signing this form, I understand that my coursework must meet the University's standards of "satisfactory academic standing" which means 1) I must maintain a GPA of 3.0 or higher for Graduate-level courses, and 2) I am only allowed to withdraw from 1 class covered by Tuition Remission. I will be required to obtain approvals for subsequent withdrawals in order to maintain my Tuition Remission eligibility. If I withdraw more than once on an unapproved basis, the next semester following the withdrawal will not be covered by Tuition Remission. Counseling may be recommended after two withdrawals throughout the Tuition Remission timeframe. My signature authorizes St. John Fisher University's Registrar's Office to release all pertinent grade and course information, covered by Tuition Remission, to the Human Resources Department.

Name _____	Student ID @ _____
Student Signature _____	Date _____

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I have read and understand the section on tuition remission as stated in the [Employee Handbook](#). I understand and have planned for any tax implications.

Employee's Supervisor

The student has been approved for:

- 100% Graduate Tuition Remission
- Difference in cost between graduate and undergraduate courses (_____)

Human Resources Representative

Remission Amount: Amount eligible (per Section 2) \$ _____