



# OKLAHOMA CITY COMMUNITY COLLEGE

Please complete this Tuition Waiver Request Form and email it to HRBenefits@OCCC.edu, 10 days prior to the start of class(es).

Date:	
Employee Name:	
Employee Department:	
Employee ID Number:	
Semester Requested:	
Waiver Request For:	<input type="checkbox"/> You (i.e., a retiree, a regular full-time employee, or a regular part-time employee)
	<input type="checkbox"/> Your spouse
	<input type="checkbox"/> Your dependent child who meets all the following criteria as defined by the IRS: <b>Relationship</b> -the student is your child or stepchild <b>Residence</b> -the student has the same principal residence as you for more than half the tax year <b>Age</b> -the student is under the age of 24 <b>Support</b> -the student did not provide more than one-half of their own support for the year <b>Marital status of dependent child</b> -if student is married, you did not file a joint return for the year, unless the return is filed only as a claim for the refund and no tax liability would exist for either spouse if they had filed separate returns
Student Name:	
Student Birthdate:	
Student ID Number:	
Requested Hours:	

**OCCC TUITION WAIVER POLICY**

- Includes regular full-time and part-time employees, and regular full-time spouse and dependent children under 24.
- Tuition waivers are for up to thirty (30) credit hours per fiscal year (July 1-June 30) for full-time employees, their spouse, and/or dependent children under 24.
- Tuition waivers are for up to fifteen (15) credit hours per fiscal year (July 1-June 30) for regular part-time employees and retirees/spouses.
- Credit hours taken in excess of the amounts specified shall be paid by the employee, or family member at the current tuition rate for those hours.
- Any student that withdraws from the class prior to completion or fails to earn a satisfactory grade of C or the equivalent will be required to reimburse the College.
- Tuition Waiver Approvals are subject to availability of funds.
- If you have not satisfied Oklahoma Residency requirements for in-state tuition (1 year) please access the [Residency Petition](#) (near bottom of page), then call the Office of Records at (405) 682-7512 for assistance, **prior to** completion and submission of this document.

**I authorize the release of academic information, pertinent to determining eligibility for the tuition waiver, to the Human Resources and Bursar Offices.**

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Approval:**

\_\_\_\_\_  
Human Resources Representative

\_\_\_\_\_  
Date