



BOWLING GREEN STATE UNIVERSITY

FEE WAIVER APPLICATION FOR CHILD OR COHABITANT SPOUSE OF A FULL-TIME EMPLOYEE.

Printed Name of Student: \_\_\_\_\_ BGSU ID# \_\_\_\_\_

Academic Year: \_\_\_\_\_ Semester: Fall Spring Summer Academic Career: Graduate \* Undergraduate Course Location: Main Firelands

\*Note: All graduate students enrolled in undergraduate courses will be assessed graduate level fees.

This student is my child or cohabitant spouse. If child is checked, please answer questions 1 through 5. Yes No

- 1. Do you provide more than one-half of the child's support which includes lodging, food, clothing, and medical expenses?
2. Did you claim the child as a dependent on your last Federal income tax return?
3. Are you planning on claiming the child as a dependant on your next Federal income tax return?
4. Is the child married?
5. What is the child's date of birth? \_\_\_\_\_

(The last eligible semester for a dependent child fee waiver is the fall semester in the calendar year in which the child turns 24 years of age.)

Retired Employee. Date of Retirement: \_\_\_\_\_

This dependent child/Cohabitant Spouse was a dependent of mine at the time of my retirement: Yes No

Employee Signature: \_\_\_\_\_ BGSU ID# \_\_\_\_\_

Printed Name of Department: \_\_\_\_\_

Supervisor/Department Head Approval: \_\_\_\_\_ Date: \_\_\_\_\_

FOR USE BY HUMAN RESOURCES

HR APPROVAL: \_\_\_\_\_ DATE: \_\_\_\_\_

- This form must be completed for each semester.
Please send this form to the Office of Human Resources (OHR) for processing.
For each semester, this form will be accepted eight (8) weeks prior to the beginning of the semester through 5:00pm on the Friday before Commencement for that semester.
Late and penalty fees are the student's responsibility.
Policy for classified and administrative staff located at http://www.bgsu.edu/downloads/execvp/file81506.pdf
Policy for faculty staff located at http://www.bgsu.edu/downloads/bgsu/file916.pdf