

To be used by supervising and resource teachers for waiver of tuition on courses taken at Murray State

Murray State University
KRS 164.2845
CPE Tuition Waiver Program
REQUEST FOR WAIVER OF TUITION

Bursar's Use Only
Course Level
\$ Amount

Applicant must complete Sections I, II, III, and IV and mail to Teacher Education Services, 2101 Alexander Hall, Murray State University, Murray, KY 42071 or send by fax to (270) 809-3073.

This form must be approved and presented to the MSU Bursar's Office before registration. The MSU Bursar's office will make the following distribution of the completed form: Employee School System CE/AO.

Section I. Applicant Information - PLEASE PRINT

Applicant Last Name First M.I. M #
Classification: Graduate Student Undergraduate Student Other
Supervising: Student Teacher Intern
School System Contact Name/Number
School System Mailing Address

Section II. Course Information Semester Spring Summer Fall Year

Table with 6 columns: Entry No., Course/Section, Course Title, CRS, Time, Day

These courses are being taken for: Undergraduate Credit Hours Graduate Credit Hours Audit

Section III. Applicant Signature

I hereby request that tuition fees be waived for my enrollment in the above MSU course(s). I understand that I must apply for admission to MSU and must enroll in the above course(s).

(1) Applicant Signature Date

Section IV. School System Authorization

This Employee is or has been a supervising or resource teacher (as defined by KRS 164.2845) at

School Name

during the academic year.

(2) Principal or Superintendent Signature Date

THE TUITION WAIVED BY MSU MAY BE A TAXABLE BENEFIT TO THE TEACHER BY THEIR EMPLOYER.

Section V. Murray State University Authorization

(1) TES Director or Designee Date

OR

(2) Dean, College of Education or Designee Date

(3) MSU Bursar's Office Date (270) 809-4227

\*\*\*If employment status changes during term, please Notify MSU Bursar's Office. (270) 809-4227

FOR MURRAY STATE BURSARS OFFICE USE ONLY
School System Approval EDU Approval
Student Financial Aid Copy CE/AO copy if 75-99