

I. Eligibility

To be eligible for the tuition waiver program, the participant must be employed as a permanent employee of the state of Washington working half-time or more and be certified by their employer as eligible for the tuition exemption according to RCW 28B.15.558.

The waivers available to state employees under this section shall also be available to teachers and other certificated instructional staff employed at public common and vocational schools, holding or seeking a valid endorsement and assignment in a state-identified shortage area. The waivers available under this section shall also be available to classified staff employed at K-12 public schools when used for coursework relevant to their work assignment.

II. Registration

Participants may register in person at Hawk Central on the first day of the quarter, or the first day of class, on space available basis and may not overload a class. This form must be completed each quarter and must be presented at the time of registration. Participants registering for class(es) without this form at the time of registration, or prior to the first day of class, will be charged full fees and WILL NOT qualify for the waiver for the current quarter.

III. Exclusions

The Tuition Waiver may not be used for self-support, contract or community education courses. It is valid only for state-supported courses.

IV. Fees

Participants will pay a non-refundable registration fee of \$5 per quarter, as well as all applicable course fees, lab fees, and other charges as appropriate. All fees must be paid at the time of registration.

V. Grades

Grades will be posted to participant's CBC transcript.

VALID FOR ONE QUARTER ONLY		Quarter and Year	
Last Name		First Name	
		Middle Initial	
Home Address		City	State
		Zip	
Student ID	Social Security Number (If applicable)	Date of Birth	Phone
Name of Agency/Department			
Position Title		How long in this position?	
I have read the eligibility requirements and hereby request a tuition exemption as a permanent employee of the state of Washington.			
_____		_____	
Signature of Employee		Date Signed	
TO BE COMPLETED BY EMPLOYEE'S HUMAN RESOURCES DEPARTMENT			
I attest under penalty of perjury that this employee is a permanent employee of the state of Washington, working at least half-time and is eligible to enroll under the tuition waiver program according to RCW 28B.15.558.			
PRINT Name of Authorizing HR Employee		Agency	
Title		Agency Mailing Address	
Signature of Authorizing HR Employee		City/State/Zip	
Date Signed		Phone Number	

We are temporarily accepting this form via email while our campuses operate remotely. Please submit the completed form to records@columbiabasin.edu no sooner than April 13th at 7 AM.

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