

**Request for Approval of Class Attendance/Fee Remission
Administrative / Professional / Faculty / Clerical / Service**

Bursar Office Form 1001 – Revised 07/07/25

PLEASE PRINT CLEARLY

ALL FORMS MUST BE COMPLETED IN FULL IN ORDER TO BE PROCESSED. INCOMPLETE FORMS WILL BE RETURNED TO STAFF MEMBER. (NEW FORM REQUIRED FOR EACH TERM.)

NAME: _____

STUDENT ID NUMBER: _____

DEPARTMENT NAME: _____

EMPLOYING CAMPUS: _____

HIRE DATE: _____

ELIGIBLE STAFF: (Please check one.)

☐ ADMINISTRATIVE / PROFESSIONAL / FACULTY

CAMPUS PHONE: _____

☐ CLERICAL / SERVICE

FOR: Fall ☐ 20____ Spring ☐ 0____ Summer ☐ 20____
(Check the semester and indicate the year.)

☐ OFFICIAL RETIREE

Schedule Days/Hrs	Subject & Course#	Credit Hours
TOTAL CREDIT HOURS		

Hours absent from work each week will be made up as follows:

Please explain your rationale if you are requesting an exception to the credit hour limitation (seven [7] credit hours per semester and four [4] credit hours per summer session): _____

Requested: _____
Employee Signature

Date

I do support and certify that enrollment in these courses will not negatively impact the employee's work performance.

Department Head Signature (REQUIRED)

Date

Supervisor Signature

Date

I hereby certify that the person listed above is eligible for a staff fee remission in accordance with Tuition for Employees and Dependents Registered as Students (II.D.3). (See link below for University Policy.)

Human Resources Signature

Date

POLICY EXCEPTION

☐ Approved

☐ Not Approved

(See link below for University Policy.) Employee's Vice Chancellor (or designee)

Date

After all signatures, send to Bursar's Office.

Bursar Office Use Only: Date Entered _____ Initials _____

**Tuition for Employees and Dependents Registered as Students (II.D.3)
Staff Fee Remission General Information**

Please refer to the Policy: *Tuition for Employees and Dependents Registered as Students (II.D.3)*. This policy may be found here: <https://www.purdue.edu/policies/business-finance/iid3.html>

