

All waivers must be submitted to: tuitionwaivers@txwes.edu



Employee Tuition Waiver Benefit Application--Summer 2026

Name University ID# Department Payroll Status: Bi-weekly Monthly Employment Status: Faculty Staff

If Part-time Employee, please indicate hours worked per week

Dependent/Spouse Information (Required if student is not the employee)

Name University ID# Relationship to employee Date of Birth

ENROLLMENT

- Summer 2026 Hours, or Session 1 Hours Session 2 Hours

Last Full Semester Registered

PROGRAM INFORMATION

Table with 2 columns: Program Name and Waiver Status. Includes options for Undergraduate and Graduate, Undergraduate, M.ED, MBA, M.S. Counseling, MFT M.A., MFT MSMF, MS Comp Science, Non Degree Seeking, and various degrees like ED.D, Ph.D., DNAP, MFT Ph.D., MSNA.

Employee Date My signature reflects acknowledgment that I am responsible for ensuring payment of fees for all covered parties, including spouse, children and myself.

Employee's Supervisor Date

ALL WAIVER APPLICATIONS MUST HAVE A CLASS SCHEDULE ATTACHED. EMPLOYEE MUST FORWARD TO HUMAN RESOURCES FOR APPROVAL BY: May 6, 2026

This section for HR use only. % Tuition Approved Authorized HR Signature Date

Please complete this section if the student is a dependent (spouse/child) of the Texas Wesleyan Employee:

Pursuant to the Family Educational Rights and Privacy Act (FERPA) (34 CFR Part 99), the undersigned hereby authorize Texas Wesleyan University to release or share only the following financial and education records to the Texas Wesleyan University employee as a dependent/spouse of the employee as it directly relates to this benefit:

- Information regarding the existence and amount of any tuition waivers that I receive as a result of my status and/or my parent's or spouse's status as an employee of The University. Information regarding my academic schedule at The University for the term in which I am applying for the benefit.

I understand that I have the right to receive a copy of such released records upon request. I further agree and acknowledge that I have read and fully understand this release, and that I have signed this release and granted my consent to the disclosure of this tuition waiver information freely and voluntarily.

Student's Signature Date