Family Tuition Benefit Request to attend Clark University
Office of Human Resources/Affirmative Action
(To be completed and signed by eligible faculty or staff member and returned to HR)

Employee Name _____ **Department** _____ ☐ **Faculty** ☐ **Staff**

Student's Name (Required for processing) _____ **Clark ID#** (Required) _____

Relationship of the student to the faculty/staff member? ☐ **Self** ☐ **Spouse*** ☐ **Qualifying dependent****

Dependent's Date of Birth: _____ **(Please check off:** ☐ **dependent**** ☐ **not a dependent)**

*Your signature below certifies that your marriage to your spouse is recognized under the laws of the Commonwealth of Massachusetts.

**To satisfy the IRS definition of "qualifying dependent child", a "child" must meet several requirements, including that the child: (a) live with the taxpayer (employee) for more than one-half of the taxable year; (b) unless disabled, be under age 19 if not a student or, under age 24 and be a full-time student at least 5 months out of the year (c) not provide more than one-half of his or her own support. Your signature below certifies that the student is your legal child and qualifies as a dependent.

	# of Courses
*** Day College**	_____
***Summer & Evening Division (SED)**	_____

☐ 1st year
☐ Sophomore
☐ Junior
☐ Senior

Graduate students:
Circle if you anticipate earning your degree at the end of the semester
YES NO

Academic Year
2020/21
(Choose one)
☐ Summer I
☐ Summer II
☐ Fall
☐ Spring

(Internal Use Only)
DC $_____
SED $_____
SPS $_____
GS $_____
CODE _____

_____
Faculty/Staff Member Signature and Date

	# of Courses
***School of Professional Studies (SPS)**	_____
****School of Management (SOM)**	
MBA/MSM	_____
MSF/MSA	_____

☐ **Audit**
☐ **Credit**

Per IRS Code Section 132: To exclude the cost of School of Professional Studies Graduate and GSOM courses in excess of $5,250 from taxable wages ***one*** of the following conditions must apply to the course(s)
(explanation attached by supervisor)
☐ The educational course must be job related and either maintain or improve job skills in my current job
☐ The educational course is required by the University, or the law, to retain the job or pay level, and serves a bona fide business purpose at the University
And the following two conditions do not apply to the course(s)

1. The educational course is needed to meet the minimum educational requirements of my current job, or
2. The educational course will qualify me for a new trade or business.

Note: IRS requires that we tax you on the value of graduate tuition if is exceeds $5250 per calendar year and does not meet the above criteria.

As noted by both my signature and my supervisor's signature below, we have reviewed and determined that the course(s) satisfy at least ***one*** of the conditions above.

_____
Faculty/Staff Member Signature and Date

_____
Supervisor Signature and Date

_____
Human Resources Approval and Date

_____
Student Accounts/GSOM

Please note: Student and/or employee will be responsible for any balance that may be due.
Approval of a tuition benefit does not guarantee admission into the program or course. Admission criteria may apply.