

LUTHER COLLEGE

Student Name _____

Student Luther ID _____

2024-2025 PART-TIME TUITION CREDIT APPLICATION

Complete this form and send to the **Office of Human Resources**:

I will enroll for the following credits (indicate # of credits):

Fall 2024 _____

J-Term 2025 _____

Spring 2025 _____

Summer 2025 _____

I qualify for a tuition credit for the following reason(s):

_____ Luther Staff _____ employee _____ spouse _____ dependent (DOB _____)

_____ Luther Faculty _____ employee _____ spouse _____ dependent (DOB _____)

_____ For dependent students, is the student married?

_____ If high school student, have you applied for PSEO? (Post-Secondary Enrollment Options Act)

_____ I want to audit this course

Employee Signature _____

Employee's Name _____

Supervisor's Signature _____

To be completed by Human Resources:

_____ Faculty (teaching at least four 4-credit courses) Eligibility Date _____

_____ Staff (at least 75%)

Human Resources Signature _____ Date _____