

LUTHER COLLEGE

2026-27 APPLICATION FOR TUITION BENEFIT PROGRAM

Mail to: Doreen Bidne, Office of Vice President for Enrollment Management, by October 1, 2025

Employee Name:

Employee's Job Title & Dept:

Address:

Employee Email:

Phone:

Name of Dependent:

Dependent's Email:

Dependent's Date of Birth:

Dependent's COLLEGE Grade Level in the fall of 2026-2027

Are you requesting this benefit for this dependent for the first time?

Tuition Benefit Programs:

(Please check each appropriate box and provide a list of schools to which your dependent is thinking of applying.)

ACM (Select your choices)

Beloit	Colorado College	Knox	Macalester	
Carleton	Cornell	Lake Forest	Monmouth	Saint Olaf
Coe	Grinnell	Lawrence	Ripon	

ELCA (Select your choices)

Bethany	Concordia	Gustavus	Newberry	Texas Lutheran		
Augsburg	Cali. Lutheran	Finlandia	Lenoir-Rhyne	Pacific Lutheran	Thiel	
Augustana (IL)	Capital	Gettysburg (NTE)	Midland	Roanoke	Wagner (NTE)	
Augustana (SD)	Carthage	Grand View	Muhlenberg	Susquehanna	Wartburg	Wittenberg

Luther

NTE

Completion of this form allows the Admissions Office to determine your eligibility for the Tuition Benefit Program. If you are deemed eligible based on Luther College policy, the Admissions Office will submit the appropriate paperwork to the receiving institution(s).

Employee's Signature

Date:

To be completed by the Office of Human Resources

Employment Status: Full time 3/4 time 5/7 time 1/2 time Less than 1/2 time

Eligibility Date based on the above employment status

Human Resources Signature

Date: