CHAPMAN
UNIVERSITY

CERTIFICATION OF DEPENDENT ELIGIBILITY FOR TUITION DISCOUNT

_____ _____
EMPLOYEE'S NAME EMPLOYEE'S I.D. #

_____ _____
DEPENDENT'S NAME DEPENDENT'S I.D. #

NAME OF ACADEMIC PROGRAM: _____

Please note: Dependents having received one undergraduate degree will NOT receive a discount on any additional undergraduate courses. Dependents having received one graduate degree will NOT receive a discount on any additional graduate courses.

FOR SPOUSE:

I certify that _____ is my legal spouse.

FOR CHILD:

I certify that _____ is my son/daughter and meets all of the following:

- has not attained his/her 25th birthday, _____/_____/_____, ***AND***
  DOB
- is unmarried, ***AND***
- resides with me, ***AND***
- is dependent on me for more than 50% of his/her support and maintenance, ***AND***

select one of the following:

☐ has been named as a dependent on my Federal Tax Return for at least the past 4 tax years (eligible for a maximum of 100% discount)
OR
☐ has been named as a dependent on my Federal Tax return for at least the recent tax year (eligible for a maximum of 30% discount).

I hereby certify that the information contained in this certification is true and correct. I understand that any misrepresentation, falsification or material omission in any part of the tuition discount benefit application process will result in an obligation to repay the University for all benefits received and may result in disciplinary action up to, and including, dismissal. I understand that documents supporting the above representations may be requested at anytime and must be available for immediate presentation.

_____ _____
EMPLOYEE'S SIGNATURE DATE

Dependents may not receive tuition discount benefits prior to verification and approval of eligibility by Human Resources.