TUITION ASSISTANCE APPLICATION **EDUCATIONAL EMPLOYEES** CENTRAL CALIFORNIA CONFERENCE OF SDA

Name of Employee:		Date of Application	on:		
According to the General Conference Tui their unmarried, dependent children unde					
I hereby apply for Tuition Assistance for authorize my employer to pay the appl	.		•	and	
	Name of Denominational	Date of		(Check 1)	
Name of Student	School Attending	Birth	Grade	Dorm	Day
My spouse is denominationally employed	l: Yes No	<u> </u>	<u>'</u>	•	
If spouse denominationally employed, lis	t employer:				
Employee Signature	_	Date			
For College Students Only:					
I certify that my child, than 50% of his/her support and claim Policy written below.		years of age and plefor tuition assista			
Employee Signature		Date			
NAD Working Policy Y 24 05					

- 5. Students Eligible for Tuition Assistance To be eligible for tuition assistance the student must be:
 - a. An unmarried dependent of the employee.
 - b. Less than twenty-four years of age unless the student has given compulsory military service, volunteer service for the Church, or has a documented medical consideration.
 - c. Eligible to be claimed as a dependent on the employee's income tax return.
 - d. Born to, or legally adopted by, the employee and/or spouse or is a stepchild by marriage receiving more than 50 percent of support from the new family unit.
- Students Eligible in Divorce and Remarriage Situations To be eligible for tuition assistance the student must be:
 - Under the custody of a divorced employee and eligible to be claimed as a dependent on the employee's tax return.
 - Under the custody of the ex-spouse of the employee and eligible to be claimed as a dependent on the employee's tax return.
- 7. Students Not Eligible for Tuition Assistance An unmarried child not under the custody of the employee and not eligible to be claimed as a dependent on the employee's tax return is not eligible for assistance.

PLEASE COMPLETE THIS FORM AND RETURN TO: CENTRAL CALIFORNIA CONFERENCE - HUMAN RESOURCES DEPARTMENT PO BOX 770, CLOVIS CA 93613 FAX 559-347-3062