



## **Dependent Tuition Waiver**

Dependents of North Central Kansas Technical College (NCKTC) employees in current, full-time positions, with at least one year of continuous service, are eligible to have the cost of tuition waived. Dependents are defined as the employee's spouse and or dependent children, as defined by IRS guidelines.

Dependents enrolling in courses for credit will receive credit for the course(s) which tuition was waived. Dependents may also enroll in non-credit continuing education courses without paying tuition.

The student is responsible to pay for the cost of books, supplies, tools, fees, and other related educational expenses all for credit-bearing and non-credit bearing courses.

The following criteria must be met in order for an employee's dependent(s) to enroll in either a credit or non-credit bearing class:

1. Must be approved by the Dean of Instructional Services or designee before the course begins by completing the NCKTC Dependent Tuition Waiver Request form.
2. Cannot be the person to make the minimum number of enrollments necessary for the course to be offered.
3. No more than six credit hours per semester or summer session per dependent.
4. A cumulative GPA of 2.0 must be maintained in courses for which the tuition was waived to continue future eligibility for the benefit.
  - a. The tuition waiver can only be applied by the same student to each course once. If a student chooses or is required to repeat a course, they will not be eligible to receive the waiver for that course.

### ***North Central Kansas Technical College***

#### **Beloit Campus**

P.O. Box 507 | Beloit, Kansas 67420  
1-800-658-4655 | 785-738-2276

#### **Hays Campus**

2205 Wheatland Ave. | Hays, Kansas 67601  
1-888-567-4297 | 785-625-2437



## NCKTC Dependent Tuition Waiver Request Form

### Employee Section:

Employee : \_\_\_\_\_

Student: \_\_\_\_\_ Relationship to employee: \_\_\_\_\_  
(if different from above)

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Total number of credit hours enrolled: \_\_\_\_\_ Tuition amount: \_\_\_\_\_

Indicate the semester you are applying for: Spring \_\_\_ 20\_\_\_ Summer \_\_\_ 20\_\_\_ Fall \_\_\_ 20\_\_\_

Below, indicate the classes (include course numbers and names) you are requesting a waiver for:

By my signature, I certify that the above information is correct and that any person for which a tuition waiver claim is made is currently a legal dependent as defined in the guidelines above. I agree to provide appropriate documentation if requested by the college.

\_\_\_\_\_  
*Employee Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Supervisor Signature*

\_\_\_\_\_  
*Date*

### FOR OFFICIAL USE ONLY:

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ VPSIS Signature: \_\_\_\_\_

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