



Application For Financial Assistance For University Credit Course

(Employees in established positions and contracts longer than six months)

Name: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Department/School/Faculty where you are employed: \_\_\_\_\_

Employee Number: \_\_\_\_\_ Student Number: \_\_\_\_\_

SECTION 1

University Credit Course Name and Number: \_\_\_\_\_

Semester and year: \_\_\_\_\_ Is this a graduate course? \_\_\_\_\_ Masters \_\_\_\_\_ Phd \_\_\_\_\_

SECTION 2

- (A) I request financial assistance of \$ \_\_\_\_\_ to cover the cost of tuition for the course above. ...
(B) If this course is not available outside normal working hours, I agree to make up the time spent in class and/or laboratory.
(C) ATTENTION: THE REGISTRAR - AUTHORIZATION TO RELEASE GRADES
I authorize the Registrar to release to the Department of Human Resources a copy of my grade for this course or a substitute course taken in the semester.

SIGNATURE

DATE

SECTION 3 FOR DEPARTMENT HEAD USE ONLY

The information requested in questions A and B following is required by the Income Tax Act to determine the existence of a taxable employee benefit. A "Yes" answer to both questions indicates the course is being taken at the request of the employer and that the financial assistance is not a taxable benefit.

Please mark (x) the appropriate response.

- (A) Is the course beneficial to the performance of the employee's duties? Yes \_\_\_\_\_ No \_\_\_\_\_
(B) Is the course being taken at the request of the department? Yes \_\_\_\_\_ No \_\_\_\_\_

DEPARTMENT HEAD SIGNATURE

DATE

RETURN COMPLETED FORM TO: MANAGER, ORGANIZATIONAL DEVELOPMENT, DEPARTMENT OF HUMAN RESOURCES

FOR DEPARTMENT OF HUMAN RESOURCES USE ONLY

Approved? Yes \_\_\_\_\_ No \_\_\_\_\_ Comments: \_\_\_\_\_
Taxable Benefit? Yes \_\_\_\_\_ No \_\_\_\_\_ Amount: \$ \_\_\_\_\_
Dept Budget Account F \_\_\_\_\_ O \_\_\_\_\_ A \_\_\_\_\_ P \_\_\_\_\_ A \_\_\_\_\_ L \_\_\_\_\_

DEPARTMENT OF HUMAN RESOURCES

DATE

Access to Information and Protection of Privacy

The information gathered on this form is collected under the authority of the Memorial University Act (RSNL 1990 c M-7). The information is used for administrative purposes of the University, including maintaining records.