

TUITION BENEFIT FOR ELIGIBLE DEPENDENTS

Employee's Name _____ Date of Hire _____

Dependent's Name _____ Dependent's Birth Date _____

College/University _____

Send check to _____

Semester _____ Circle Level: **Freshman Sophomore Junior Senior**

In the space provided below, please indicate the costs at the College/University for this semester:

Tuition _____ Activity Fee _____ Books* _____
Room _____ Health Fee _____ Other Fees _____
Board _____ Technology Fee _____

*Book expenses only apply to those receiving **PELL and Pennsylvania State Grants** for which a **maximum of \$500.00**.

If living Off-Campus please indicate the following:

Off Campus Lease _____/Month or Semester (circle one)*
Highest Meal Plan offered on Campus _____
Other School Related Expenses _____

***A copy of the rent/lease agreement is required**

The following grants/financial aid awards are available to my eligible dependent and will apply toward his/her **tuition** for the term/semester indicated.

<u>Grant/Award – Not Loan</u>	<u>Amount</u>
PA Grant	\$ _____
PELL	\$ _____
GI Bill	\$ _____
SEOG	\$ _____
Other Grants, Scholarships or Awards	\$ _____

In making this application, I have included all appropriate grants & financial awards that my eligible dependent has received or to my knowledge will be receiving for this particular term/semester. I understand that any grants & awards (not loans) exceeding the cost of room and board at the attending institution will be applied toward reducing Gettysburg College's costs.

Employee Signature _____ Date _____

Attach Invoice & Financial Aid Award letter / All checks will be made payable to the Institution