COLUMBIA UNIVERSITY HUMAN RESOURCES

Tuition Exemption Benefit Form—Post-Doctoral Fellows and Others

This form needs to be approved and completed by HR Benefits. Please scan and email the signed form to hrbenefits@columbia.edu or deliver to HR Benefits at 615 West 131st St. 4th Floor, New York, NY 10027. HR Benefits will forward the completed and signed form to Student Financial Services.

STUDENT'S NAME: (PLEASE PRINT)

LAST FIRST M.I. UNI

SCHOOL

I am eligible for Tuition Exemption based upon my status as (mark one)

☐ Post-Doctoral Fellow ☐ Other _____
(Please specify)

COURSES FOR WHICH YOU ARE REQUESTING EXEMPTION

COURSE NUMBER	SECTION	Points

Term Year _____
☐ Fall
☐ Spring
☐ Summer

Student Status
☐ Undergraduate
☐ Graduate

I hereby make application for tuition exemption benefit for this the term indicated. Furthermore, I certify that I have read and understand the rules and regulations of the Tuition Exemption policy available at www.hr.columbia.edu/benefits/tuition.

Student's Signature Date

I understand that the tuition exemption benefits may be reported as imputed income. If applicable, I will receive a form 1099-M with the imputed income for the tuition exemption benefits granted by Columbia University to me.

Signature Date

HR BENEFITS

Permission for _____ points

HR Benefits Approval:

Signature Date

Dept. _____