



## **TUITION REDUCTION FORM FOR AULTMAN COLLEGE OR SCHOOL OF NURSING ALUMNI**

Purpose:

To provide tuition reduction program for alumni consistent with the needs of Aultman College.

Eligibility:

1. Aultman College or Aultman School of Nursing alumni must be accepted into any Aultman College degree granting program except the Bachelor of Science in Nursing Completion program.
2. Alumni must return the signed Tuition Reduction Program form to Aultman College no later than the end of the add/drop period (4:00 pm on the add/drop date as it is posted in the academic calendar).
3. The completed form must be signed by the Registrar to confirm graduation from Aultman College or the Aultman School of Nursing.
4. Alumni receiving scholarships in which 100% of tuition and fees are paid in full are ineligible for the Tuition Reduction Program.

Approval of Funds:

**Process**

1. To receive the Aultman College Alumni Tuition Reduction, Aultman College student employees must complete and submit the Tuition Reduction Program for Alumni form to the college office no later than the end of the add/drop period (4:00 pm on the add/drop date as it is posted in the academic calendar).
2. Registrar must verify and sign the Tuition Reduction Program form prior to the end of the drop/add period of the initial entrance term/semester.
3. The Financial Aid Administrator will review, process the form, and apply the discount, as appropriate, after the end of the college refund period each semester (see academic calendar for dates each semester).
4. Tuition Reduction amounts are approved by the president of Aultman College and are subject to change.



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Program Guidelines

Tuition will be applied after week 7 of the semester. Aultman College fees are not eligible for the reduction.

To be completed by the student/employee or dependent:

Student Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Previous Name(s): \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Program / Degree: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Projected Graduation Date: \_\_\_\_\_

What program are you enrolling in?

Table with 2 columns: Program Name, Selection Box. Rows: ASN (Nursing), BSN (Nursing), empty row.

Table with 2 columns: Program Name, Selection Box. Rows: AASR (Radiography), ASHS (Health Sciences), BSHS (Health Sciences).

Table with 2 columns: Program Name, Selection Box. Rows: BSW (Social Work), Non-Degree Seeking, empty row.

By signing below, I am confirming that I am an alumni of Aultman College or Aultman Hospital School of Nursing. I understand I must submit this signed Alumni Tuition Reduction Program form to Aultman College by 4:00 pm on the add/drop date as it is posted in the academic calendar.

Signature of Alumni

Date

To be completed by the Office of the Registrar

Alumni Name: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Program / Degree: \_\_\_\_\_

Signature of Registrar

Date