Maryland Institute College of Art

TUITION REMISSION FORM

Please read these instructions carefully and follow the steps in the order below.

1. Complete both sides of the form and sign on the bottom of the back side.
2. Obtain supervisor’s signature (only required if employee is taking the class).
3. Obtain signature from Human Resources (B310). Please call 410-225-2363 to confirm availability.
4. Obtain signature from Payroll (B238). Please call 410-225-2123 to confirm availability.
5. Bring form to Open Studies (1229 Mount Royal) for Open Studies classes and for Master of Professional Studies (MPS) of Business of Art and Design and Information Visualization programs or to Enrollment Services (B223) for undergraduate or graduate classes. Open Studies or Enrollment Services will sign the form and forward it to Student Accounts where the tuition remission benefit will be applied to the student’s account.

If you have any questions regarding the above process, please contact Human Resources at 410-225-2363.

### STUDENT INFORMATION

<table>
<thead>
<tr>
<th>[ ] MICA Employee</th>
<th>[ ] Non-MICA Employee</th>
</tr>
</thead>
</table>

**NAME** __________________________ MICA ID# ________________

**STREET ADDRESS** __________________________

**CITY** __________________________ **STATE** ________________ **ZIP** ________________

**RELATION TO EMPLOYEE** [ ] Self [ ] Spouse [ ] Partner [ ] Child (must be a qualified dependent)

### EMPLOYEE INFORMATION

**EMPLOYEE NAME** __________________________ MICA ID# ________________

**DEPARTMENT** __________________________ MICA PHONE EXT. # ________________

### FULL DEGREE COURSE INFORMATION

<table>
<thead>
<tr>
<th>[ ] Undergraduate Program</th>
<th>[ ] Graduate Program</th>
</tr>
</thead>
</table>

**TERM** __________________________ **YEAR** __________________________

### COURSE(S) INFORMATION

| Open Studies (Indicate course(s) below, attach registration form) |
| Part-time undergraduate degree (Indicate course(s) below, attach registration form) |

**TERM** __________________________ **YEAR** __________________________

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th># of credits/Audit</th>
<th>Day(s)/Time of Class</th>
<th>Tuition Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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<td>3.</td>
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</tbody>
</table>

*Students will be added to course(s) on a space available basis.*

Please see reverse side for charge structure and required signatures
By signing below I agree to abide by MICA's Tuition Remission guidelines and understand that I am required to pay all applicable fees. These fees are non-refundable if I drop or withdraw from the courses. Refer to the Academic Bulletin (Degree Program) or School for Professional and Continuing Studies Catalog for an outline of required/possible fees that may be charged.

Employee's Signature __________________________ Date __________
AUTHORIZATIONS

Employee’s Supervisor__________________________________________ Date________________
(Required if employee taking class – not for dependent tuition remission)

Human Resources__________________________________________ Date________________

Payroll Office__________________________________________ Date________________

Enrollment Services/Open Studies__________________________________________ Date________________

COPIES:
☐ Human Resources __________
☐ Payroll __________
☐ Enrollment Services/Open Studies___________
☐ Budget __________
☐ Student Accounts __________
☐ Employee __________