



See page 2 for Instructions - Incomplete information will delay the process

**NOTE:** First year students (undergraduate or graduate) **DO NOT** submit until registration is complete. Please see page 2 for details.

**Applicant Information**

Date of Application: \_\_\_\_\_

Employee Name: \_\_\_\_\_

OHIO Email: \_\_\_\_\_

Employee OHIO ID#: \_\_\_\_\_

Student PID#: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Employment Status:**

Employee is: *Check all that apply*

- Full Time
- Part Time
- Military Science
- Retired – Effective \_\_\_\_\_
- Approved Leave
- Severance – Effective \_\_\_\_\_

**Enrollment Information**

Employee forms need to be filled out EACH semester.

Term Enrolled: *Check one*

- Fall Academic Year: \_\_\_\_\_
- Spring Academic Year: \_\_\_\_\_
- Summer Academic Year: \_\_\_\_\_

Program Enrolled: \_\_\_\_\_

- Graduate
- Undergraduate

|                        |                           |                     |
|------------------------|---------------------------|---------------------|
| <b>Course Title(s)</b> | <b>Meeting Time/ Days</b> | <b>Credit Hours</b> |
|------------------------|---------------------------|---------------------|

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |

Total Credit Hours: \_\_\_\_\_

**Employee's Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_

*My signature acknowledges I am aware of the following: Educational Benefits shall not be applicable to noncredit courses, noncredit workshops, special course fees (ex. technology fee, class fees, program fees, and etc.) and differential tuition in excess of a regular graduate program; Educational benefits for graduate tuition and medical tuition is limited to the full time instructional fee for the [Athens Campus Graduate Comprehensive Tuition Structure](#); I understand that if a benefit is applied in error it will be removed retroactively resulting in a tuition balance due to the university. I understand that I may be subject to withholding taxes under regulations of the Internal Revenue Service for graduate benefits.*

**Supervisor**

- The above employee is required to make up time away from the job:  Yes  No
- Does the education maintain or improve skills for the current job?  Yes  No
- Is this education needed to meet the minimum qualifications of the job?  Yes  No
- Class is part of a program to qualify employee for a new trade or business?  Yes  No

Supervisor Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

*As supervisor, my signature signifies approval for the above request.*

**Department Head**

**This section only needs to be completed if the following apply:**

The above employee is granted permission to be a full-time student:  Yes  No  
(More than 11 Undergraduate hours, more than 8 Graduate hours)

The coursework is directly related to the employee's position and **general fees are being paid by the department.**  Yes  No

Department Account Number: \_\_\_\_\_

Entity Source Organization Activity Function

**Department Head Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_

## Instructions for completing the Employee Educational Benefits Request Form

- 1) Complete the request form thoroughly
  - a. **Applicant Information**
    - i. Employee ID # is required and can be found at <https://eelookup.ohio.edu/eelookup/eelookup>
    - ii. Student PID # is required and can be obtained by **THE STUDENT** in the following ways:
      1. The Student ID card
      2. MYOHIO page
      3. In person at the Registrar's Office with proper identification
  - b. **Enrollment Information**
    - i. Employees have to fill out the form **EACH** semester
    - ii. Check the semester in which you want the benefit applied
    - iii. Indicate Program Enrolled, if not in a program, put NO PROGRAM
      1. Certain programs are **not eligible for educational benefits**, to view a listing visit: <https://www.ohio.edu/bursar/bursar-graduate-differential-rates/partner-programs>
    - iv. **CHECK** Graduate or Undergraduate (enrolled in both, check both boxes)
    - v. List courses and credit hours for each semester
    - vi. **Employee's Signature is required**
  - c. **Supervisor Section**
    - i. Employees are permitted to take **up to** eleven (11) undergraduate hours or eight (8) graduate hours per term with approval of the supervisor
    - ii. Supervisor **MUST** answer questions to determine if time away from work must be made up, and to determine whether graduate benefits for employees meets the working condition fringe benefit exclusion. Some graduate tuition benefits may be taxable if the working condition exclusion is not met and the benefit is greater than \$5,250 in a calendar year. I.R.S code section 132(d) states the exclusion may apply for classes that improve current job skills, not be taken to meet minimum requirements of employee's current position, and not prepare the employee for a different career. (An example of a different career would an HR employee pursuing a graduate level medical degree).
  - d. **Department Head Section**
    - i. An Employee wishing to take **more** than 11 undergraduate or 8 graduate hours per term must get permission from his/her Departmental Head
    - ii. General Fee waiver may be granted for course work which is directly related to the employee's current position, and is only granted on a course by course basis, not for an entire degree program
    - iii. **The Department Head's signature is required**
    - iv. Account number will be required to process if the general fee is to be paid by the department
- 2) Timely submission of this form can ensure correct billing
  - a. **PLEASE NOTE** – Accounts will not be created until registration of the first class is complete for the following:
    - i. First Year Students
    - ii. Graduate Students who have not yet been accepted and have not yet registered

**(Please submit form once registration is complete, subsequent years/terms forms can be submitted prior to term starting).**

## Information Regarding the Educational Benefits Program

- 1) Detailed information regarding the educational benefit can be found at <https://www.ohio.edu/hr/benefits/educational-benefits>:
  - a. **Eligibility**
  - b. **How to Apply**
  - c. **Fees & Taxation**
  - d. **Hocking College and Zanesville**
- 2) The Educational Benefits Request Form is **updated each year** per IRS regulations, and will be available each **April**
- 3) Credits will be applied to the student's account automatically each semester and will adjust according to the number of hours enrolled
- 4) There are programs that have higher fees than that of regular programs. Be aware that Educational Benefits are limited to that of regular programs. If you have specific questions regarding the amounts covered for these programs contact the program sponsor
- 5) For further information, see [Policy 40.015](#)

### Please return this form and direct questions to:

Ohio University Human Resources, Attn: Educational Benefits, Grosvenor Hall 324, 1 Ohio University Athens, OH 45701

T: (740) 593-1636, F: (740) 597-1337, \*Email: [uhr@ohio.edu](mailto:uhr@ohio.edu)

**\* Emailed (scanned)/faxed forms do require appropriate signatures AND do not require hard copy.**