



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.

**Employee Information**

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

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

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

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

\*Employee Address: \_\_\_\_\_

**Employee is/was:** *Check all that apply*

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

\*Use HOME address. If employee is deceased, use student’s address as student will then be responsible for taxes, if applicable.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

As the employee, I understand that I will be subject to withholding taxes under regulations of the Internal Revenue Service for non-tax dependent children receiving undergraduate benefits and any child or spouse receiving graduate benefits. Withholding taxes apply to benefits provided to Domestic Partners enrolled in both undergraduate and graduate level courses.

**Enrollment Information**

*Dependent forms may be filled out annually.*

Term(s) of Enrollment: *Check all that may apply*

- Fall
- Spring
- Summer

**Year of Enrollment:** \_\_\_\_\_

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

*Certain Programs are not eligible; please see following page for details.*

**Student Information**

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

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

Student Email: \_\_\_\_\_

*Check one:*

- Child** (Both tax years need to be checked).
  - Child is a dependent for tax purposes for **this** calendar year: \_\_\_\_\_  Yes  No
  - Child is a dependent for tax purposes for **next** calendar year: \_\_\_\_\_  Yes  No
- Spouse**
- Domestic Partner** (Affidavit on File with the Benefits Office).

*Check one:*

- Graduate
- Undergraduate

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I hereby apply for the Educational Benefits Program for undergraduate and/or graduate study for qualified dependents of faculty, administrative, and classified employees at Ohio University. I understand that eligibility for this benefit is contingent upon continued employment status or retirement of the employee, whose signature appears above. If the employee associated with the benefit is deceased, I understand I will be responsible for any taxes incurred based on IRS parameters.

**For office use ONLY**

Benefit Amount \_\_\_\_\_ FTE \_\_\_\_\_ Org Number \_\_\_\_\_ Dependency \_\_\_\_\_

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**Instructions for Completing the Dependent Educational Benefits Request Form**

- 1) Complete the request form thoroughly
  - a. **Employee Information**
    - i. If the employee is retired or deceased please include their employee number or social security number.
    - ii. If the employee is deceased, use student's home address in the employee information section.
    - iii. Signature is required by the employee
  - b. **Enrollment Information**
    - i. Dependent Form can be filled out annually
    - ii. Check all semesters that will be attended
    - iii. Indicate Program Enrolled, if not in a program, put NO PROGRAM
      1. Certain programs are **not eligible for educational benefits**  
Visit <https://www.ohio.edu/ecampus/partner-programs.html> for more information
  - c. **Student Information**
    - i. 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
    - ii. Check the proper person receiving the benefit (e.g. Child, Spouse, or Domestic Partner).
      1. For children make sure to check **BOTH** years for tax purposes
      2. **CHECK** Graduate or Undergraduate (enrolled in both, check both boxes)
- 2) Timely submission of this form can ensure correct billing.
  - a. **PLEASE NOTE** – Accounts will not be created until registration of the first class 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. Applying
  - c. Fees & Taxation
  - d. Hocking College
- 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 40.016](#)

**Taxation**

- 1) Benefits will be subject to withholding taxes under regulations of the Internal Revenue Service for the following:
  - a. Children who are non-dependents for tax purposes and are enrolled in undergraduate courses
  - b. Children or spouse enrolled in graduate level courses
  - c. Domestic Partners enrolled in both undergraduate and graduate level courses
  - d. If the employee associated with the benefit is deceased, the student will be responsible for any taxes
- 2) To view the tax withholding schedule, visit [the Benefits Taxation page](#).
  - a. Active employees will have taxes withheld from paychecks each semester of attendance
  - b. Retirees/students taxed will receive a 1099 at the end of the year

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

Ohio University Human Resources, Attn: Educational Benefits, 160 West Union Street, Suite 276,  
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**

**NOTE:** In accordance with Federal and State Financial Aid Law, if you receive any Federal, State, or Ohio University student financial aid as a result of incomplete or incorrect information, or your financial aid status changes, you must repay all financial aid to which you were not entitled. Any person who knowingly makes a false statement or misrepresentation in the application for student financial aid is in violation of the law and is subject to criminal prosecution and also subject to Ohio University disciplinary action.