

APPLICATION FOR TUITION WAIVER

**Community and Public Service Program
Social Sciences 112
1400 Washington Avenue
Albany, NY 12222
FAX: (518) 442-5684
Swalsh@uamail.albany.edu**

I request that a tuition waiver be issued to me at the end of this semester:

_____ Social Security No. _____
(Supervisor)

I supervised the following student for the _____ Semester.

_____ Course _____ /Credits _____
(Student)

Note: This Application for Tuition Waiver is to be submitted to the Community and Public Service Program office at the above address.

AGENCY: _____

APPLYING SUPERVISOR'S HOME ADDRESS (We must have this on file)

Street Address, Apt. # (if any)

City/State/Zip Code

AGENCY CONTACT PERSON OF RECORD: _____

TELEPHONE NUMBER: _____ FAX: _____

| | |
|---|-------------|
| I CERTIFY THAT ALL OF THE ABOVE INFORMATION IS ACCURATE | |
| _____ | Date: _____ |
| (Signature of Applying Supervisor) | |
| _____ | Date: _____ |
| (CPSP's Authorization Signature) | |

Based on the advice of its independent auditors, SUNY Central has determined that tuition waiver certificates are compensation potentially subject to federal, state or local income taxes, whether or not they are ever redeemed. Further, SUNY Central has determined that it is obligated to comply with the tax laws with respect to the issuance of 1099 forms for the year in which the certificates are issued. The value imputed to these waivers for 1099 purposes is the per credit hour tuition rate for undergraduate study in effect on the date of issuance multiplied by the number of credits for which the certificates are issued. Since individual circumstances vary, recipients should consult their own tax advisors.

| | |
|--|-------|
| I have read the above paragraph and fully understand that accepting a tuition waiver bears potential tax liability. I also understand that I will receive a 1099 Miscellaneous Income form and that this information will be furnished to the IRS. | |
| _____ | _____ |
| Signature of Applying Supervisor | Date |