

## State Employee Tuition Waiver Program

Florida law allows Pensacola State College to waive tuition and fees for State employees of the executive, legislative, and judicial branches of State government for up to six credit hours per term, on a space-available\* basis. All other charges/fees (application fee, lab fee, distance learning fees, textbooks, etc.) are the student's responsibility. Students will be awarded a grade for the course attempted. No audit of the course will be approved.

First-time PENSACOLA STATE COLLEGE students, must complete the college admissions process by submitting an Admissions Application to the PENSACOLA STATE COLLEGE Admissions/Records Office, online or on campus.

Follow the steps listed below to activate your use of the State Employee Waiver:

- 1. You must complete the State Employee Tuition Waiver form and have it signed by your supervisor. Submit the completed and signed form to the Pensacola State College Cashier's Office. To avoid delays, you may submit the form online through Workday:
  - a. In the search bar of your Workday account, type Create Request or on your Homepage select Request.
  - b. Click Create Request.
  - c. Select Cashier's: State Employee using the dropdown menu or by entering search terms.
  - d. Click OK.
  - e. The *Request* will display required fields requesting more information and for the signed form to be attached.
  - f. Once you have finished, click **Submit**.
- 2. You **can** register for classes on the first day of each session.
  - \*Registering and/or paying fees to hold a seat in a class <u>prior</u> to the space-available dates will forfeit your eligibility to use the waiver for that course/section.



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(Intent to enroll at Pensacola State College)

By completing this form, you are notifying the institution of your intent to enroll at Pensacola State College. You will still need to complete the appropriate forms for admission and registration at the institution.

Employee Name		Student ID/Date of Birth	
Agency		Agency Telephone #	
Division		Bureau	
Address of Agency		City, State, Zip	
Agency Email Address		Term of Enrollment (check only one) Fall Spring Summer	
	COURSES FOR WHICH R	EGISTRATION IS REQUESTED	
Indicate Sec	ction number, Course number, Co Choose four courses: two p	ourse Title, and the number of credit he referred and two alternate courses	ours for each.
Section #	Course #	Course Title	Credit Hours
By my signature below, I acknowledge the following:  ◆ My waiver of tuition and fees will apply to no more than six credit hours per term  ◆ I must register for classes during the State Employee registration period prescribed by the state or community college that I Plan to attend  ◆ All other charges/fees (matriculation fee, lab fees, distance learning fees, textbooks, etc.) are my responsibility  ◆ My ability to secure the course I request depends on space availability  Student Signature Date			
above-named employee holds  Printed name and title of Supersignature of Supervisor:	employee to participate in the S an established position with a f ervisor:		
Signature of Agency Head (or designee):			