



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, 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 Application to the PENSACOLA STATE COLLEGE online.

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 Student Financial Services Office.
2. To avoid delay, 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: 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. Click **Submit** once you have finished.
3. You **can** register for classes on the first day of each session.

***Registering and/or paying fees to hold a seat in a class prior to the space-available dates will forfeit your eligibility to use the waiver for that course/section.**



State Employee Tuition Waiver Program

(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 _____ **Telephone #** _____

Division _____ **Bureau** _____

Address of Agency _____ **City, State, Zip** _____

Agency Email Address _____ **Term of Enrollment (check only one):**

Fall Spring Summer

COURSES FOR WHICH REGISTRATION IS REQUESTED

Indicate Section number, Course number, Course title, and the number of credit hours for each.

With 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 (tuition/fees) (application fee, lab fees, distance learning fees, textbooks, etc) are my responsibility.

Student Signature _____ Date _____

Agency Authorization

I authorize the above-named employee to participate in the State Employee Tuition Waiver Program. I also certify that the above-named employee holds an established position with full-time equivalency (FTE).

Printed name and title of Supervisor _____

Signature of Supervisor _____

Printed name and title of Agency Head (or designee) _____

Signature of Agency Head (or designee) _____