THE OHIO STATE UNIVERSITY

Dependent Tuition Assistance Application

Active eligible faculty and staff may apply online by signing in to eProfile.osu.edu; click on eBenefits and complete the application each term for each dependent. Refer to the Dependent Tuition Assistance Plan at hr.osu.edu/benefits/dependent-tuition-assistance. A separate form must be completed each term for each dependent. Dependents must have their social security number (SSN) on file within Buckeye Link before this dependent tuition assistance application can be processed. Following processing of this application, a tuition credit will appear on the student's statement of account before the term begins, unless the maximum benefit has been used.

SECTION 1: PERSONAL INFORMATION

Employment Status (please check only one option): ☐ Active ☐ Retired/Returned ☐ Deceased

Employee's Full Name: First | M.I. | Last | OSU Employee ID# (required)

Daytime Phone Number | Email Address

Was/is your spouse also employed by Ohio State? ☐ **No** ☐ **Yes –** ☐ Active ☐ Retired/Returned ☐ Deceased
If yes, please provide the following information:

Full name: First | M.I. | Last | OSU Employee ID# (required)

SECTION 2: DEPENDENT INFORMATION

Application must be submitted by the first Friday of the new term (DTA application deadline calendar available at hr.osu.edu/benefits/dependent-tuition-assistance). **Submission is required each term.**

I am enrolling my dependent for the following term: _____ (Ex. Autumn '17). Separate applications required for each term.

Dependent's Full Name: First | M.I. | Last | Date of Birth

Social Security Number (required) | OSU student ID# (8-9 digits) | Gender: Male / Female

Dependent's Relationship to Employee (Please check only one option below — based on eligibility requirements defined in the Dependent Tuition Plan document:

☐ Spouse[1] ☐ Dependent child

[1]Proceed to Section 3 if this application is for a spouse.

Employee and Spouse's Dependent: Complete if the dependent is your or your spouse's natural born child, adopted child or foster child of at least five years.
Is the dependent child eligible to be claimed as a dependent on the employee's Federal Form 1040 U.S. Individual Income Tax Return for the calendar year for which tuition assistance is requested? ☐ yes ☐ no

SECTION 3: CERTIFICATION

I provide this information to be used by the university for the sole purpose of determining the eligibility of the above dependent for tuition assistance. This information will be used solely for the administration of these benefits and filed within the Office of Human Resources. I understand that availability of these benefits is based on eligibility requirements and subject to any future changes in plan provisions.

I certify that my signature serves as confirmation that I meet the criteria outlined in the Benefits Eligibility Requirements for Dependents (hr.osu.edu/benefits/dependent-tuition-assistance).

I have read and understand the Dependent Tuition Assistance Plan (hr.osu.edu/benefits/dependent-tuition-assistance). I am aware that tuition assistance for graduate-level and professional-level fees are currently subject to taxation. Under penalties of perjury, I declare that the above information is true, correct and complete. I acknowledge my responsibility to pay the full amount of tuition assistance in the event I am not eligible for tuition assistance.

Employee's Signature | Date

For additional information, visit hr.osu.edu/benefits/dependent-tuition-assistance, or contact Human Resources Customer Service Center at HR@osu.edu, **614-292-1050** or **800-678-6010**.

Return completed form to: The Ohio State University, Human Resources, Benefits/Tuition Assistance, 1590 N. High St., Suite 300, Columbus, OH 43201-2190, or fax to: **614-292-7813.**