

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 Guidelines at hr.osu.edu/benefits/dependent-tuition-assistance. A separate form must be completed each term for each dependent.

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 or same-sex domestic partner also employed by Ohio State? No Yes – Active Retired/Returned Deceased
If yes, please provide the following information:

Spouse/same-sex domestic partner's 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 '14). 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 set forth in the DTA Guidelines):

Spouse¹ Dependent child Same-sex domestic partner^{1,2} Same-sex domestic partner's dependent child

¹Proceed to Section 3 if this application is for a spouse or same-sex domestic partner. ²Affidavit required.

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

Employee and Same-Sex Domestic Partner's Dependent: Complete if the dependent is your same-sex domestic partner'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 program provisions. I agree, upon request from the Office of Human Resources, to provide a copy of page one of my or my same-sex domestic partner's Form 1040 U.S. Individual Income Tax Return. I may remove the financial information from the tax return before submitting it to the Office of Human Resources.

I certify that my signature serves as confirmation that I meet the criteria outlined in the Benefits Eligibility Guidelines for Dependents if this application is submitted for my same-sex domestic partner or the child of my same-sex domestic partner (hr.osu.edu/benefits/dependent-tuition-assistance).

I have read and understand the tuition assistance program guidelines as detailed in the Dependent Tuition Assistance Guide (hr.osu.edu/benefits/dependent-tuition-assistance). I am aware that tuition assistance for graduate-level fees and the full tuition assistance for same-sex domestic partners and dependent children of same-sex domestic partners 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.