2300 Adams Avenue | Scranton, PA 18509



570-348-6212 | F: 570-961-4739 studentaccounts@marywood.edu

<u>FULL-TIME EMPLOYMENT VERIFICATION</u> FOR CATHOLIC SOCIAL SERVICES DISCOUNT

TO BE ELIGIBLE FOR THE DISCOUNT, A STUDENT MUST:

- a. complete the following form and submit it to the Student Accounts Office at the time of registration *for each term for which you are requesting the tuition discount*;
- b. have all previous bills owed to Marywood University paid in full;
- c. pay all fees due at registration;
- d. remit at registration any tuition not paid directly by the employer;
- e. pay in full any final semester charges prior to the following semester or graduation.

TO BE COMPLETED BY STUDENT: (please print)

I request the **50% discount (block tuition or per credit for undergraduates) or 25% discount (for graduate and PHD programs)** off of the full tuition graduate rate for the _______semester. I certify that I qualify for the tuition discount. I understand and agree that if, for any reason, my employer refuses payment, I take leave of my present place of employment, or if I withdraw from my classes after the 100% cancellation period, I will be responsible to Marywood University for the immediate and full payment of all tuition due.

For the semester noted above, I am enrolled for _____ credits.

| Student ID #: | Name of Student: | | |
|---------------|-----------------------|--|--|
| Employer: | Address of Student: | | |
| Phone #: | street | | |
| Email: | city state zip | | |
| Date: | Signature of Student: | | |

| TO BE COMPLETED BY EMPLOYEE'S HUMAN RESOURCE DEPARTMENT: (please print) | | | | |
|---|-----------------|-------|-----|--|
| I certify that the above-named applicant is employed full-time by Catholic Social Services: | | | | |
| Phone #: | Name of HR Rep: | | | |
| Email: | Title: | | | |
| Phone #: | street | | | |
| | city | state | zip | |
| Date: | Signature: | | | |

(12/2022)