**APPLICATION FORM**

**Note to the employee**

Before completing this form to apply for an undergraduate tuition fee reduction for your child, please read the University’s *Policy on Undergraduate Student Tuition Fee Reduction for Children of Non-UK/EU Staff* and discuss it with your HR Partner.

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| **Section A: To be completed by the employee** | |
| Full Name: |  |
| Job Title: |  |
| Grade: |  |
| Department/Section: |  |
| Date of Appointment: |  |
| Type of Employment Contract: *(please tick)* | Open □  Fixed term □ *(please specify remaining length of employment contract)*  …………………………………………………….... |

|  |  |
| --- | --- |
| %FTE: |  |
| **Section B: To be completed by the employee on behalf of the child seeking a tuition fee reduction** | |
| Full Name: |  |
| Date of Birth: |  |
| UCAS Applicant ID: |  |
| Undergraduate Degree Course: |  |
| Academic Department: |  |
| Length of Degree Course: |  |
| Course Start Date: |  |
| Academic year tuition fee reduction applicable from: |  |
| Signature of staff member: |  |
| Date: |  |
| Signature of child: |  |
| Date: |  |

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| **Section C: To be completed by HR Services** |
| I confirm that the details in Section A match those on ResourceLink  Name Date |

**Please forward the completed form to HR Services with evidence of birth certificate, official court documentation or similar certification**

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| **Section D: To be completed by the HR Partner** | | | | |
| Do you recommend the fee reduction application is supported? | Yes |  | No |  |
| If no, reason(s) for not recommending the tuition fee reduction application is supported: | | | | |
|  | | | | |
| Signature of HR Partner: |  | | | |
| Date: |  | | | |

**Please forward the form to the Head of Department**

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| **Section E: To be completed by the Head of Department** | | | | |
| Do you support the application? | Yes |  | No |  |
| If no, reason(s) for not supporting the application: | | | | |
|  | | | | |
| Signature of HoD: |  | | | |
| Date: |  | | | |

**Please forward the form to the Dean of the Faculty / Academic Registrar**

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| **Section F: To be completed by the Dean / Academic Registrar** | | | | |
| Do you support the application? | Yes |  | No |  |
| If no, reason(s) for not approving the application: | | | | |
|  | | | | |
| Signature of Dean: |  | | | |
| Date: |  | | | |

**Please return the completed form to your HR Partner**

* Your HR Partner will conduct a final check that the application may be processed
* HR Services will write to the employee to confirm the outcome if successful and retain a copy of the application on the individual’s file
* For the first year of enrolment HR Services will forward the completed form to Student Recruitment and Admissions/Finance for processing and send a copy for information to Student Services
* For subsequent years of enrolment HR Services will forward the completed form to Student Services/Finance for processing