

Faculty/Staff Registration Request

Enrollment Services

Phone 626.396.2313
Fax 626.396.2209
enrollmentservices@artcenter.edu

Faculty/Staff Information

Last Name, _____ First Name _____ Phone No. _____

Term Spring Summer Fall Year _____

Important Information

Course registration requests are subject to seat availability.

ArtCenter students have first priority to seat availability.

Faculty/Staff Registration Requests will not be processed until Week 1 of the enrollment semester.

Sample

	Subject - #	Section	Class Title	Day & Time	Instructor
Class 1	SOC-200	02	Art of Research	F 12 pm - 3 pm	John Smith
Second Choice	SOC-200	05	Art of Research	TH 7 pm - 10 pm	Jane Doe

Requested Schedule

Requested Schedule

	Subject - #	Section	Class Title	Day & Time	Instructor
Class 1					
Second Choice					

Faculty/Staff Signature

Faculty/Staff Signature

Date

For Enrollment Services Use Only

For Faculty:

Verified class schedule assignment for the enrollment semester.

Yes No

For Staff:

Verified with Human Resources of current employment status.

Yes No

Entered By

Date

ArtCenter College of Design

1700 Lida Street, Pasadena, California 91103



**APPLICATION FOR TUITION REDUCTION
SELF, CHILD OR SPOUSE/DOMESTIC PARTNER
CURRENTLY EMPLOYED BENEFITS-ELIGIBLE FACULTY AND STAFF**

Year _____
Term _____

Return to: Human Resources Department, ArtCenter College of Design

Student Name _____	Student ID # _____	Relationship of Student to Employee: <input type="checkbox"/> Self <input type="checkbox"/> Child <input type="checkbox"/> Spouse/Domestic Partner Employee Status: <input type="checkbox"/> Full-time Faculty <input type="checkbox"/> Part-time Faculty <input type="checkbox"/> Full-time Staff <input type="checkbox"/> Part-time Staff
Employee Name _____	SSN (last 4 digits) xxx-xx- _____	
Department _____		
Telephone Number _____		
Email _____		

Undergraduate courses: Employees or spouses are exempt from taxation for undergraduate course work. Eligible children are exempt from taxes only for undergraduate coursework and only if they qualify as a dependent under applicable Internal Revenue Code provisions. **Please note:** Tuition Reduction benefits for registered domestic partners or children of registered domestic partners are not exempt from federal taxation.

- If you are applying for undergraduate tuition reduction benefits for your child, check this box and fill out the Dependent Child Certification form, which must be completed at least once during the calendar year.

Graduate courses: Tuition Reduction benefits for graduate courses taken by an employee's child or spouse is taxable income to the employee. Tuition benefits for graduate courses are exempt from taxes only for the employee. If the employee receives graduate level tuition reduction benefits in excess of \$5,250 per calendar year, the excess is considered taxable income unless the course(s) qualify as job related under Internal Revenue Code.

- If you are applying for graduate tuition reduction for yourself, check this box and complete the Graduate Coursework Certification form.

Please consult your tax preparer if you have any tax related questions about this benefit.

I have read the current Tuition Assistance Benefit policy and I am eligible to receive tuition assistance as described in the policy. I certify the student noted above is my child or spouse/domestic partner, as defined in the policy. I am further required to inform the Human Resources Department of any change in relationship that disqualifies my child or spouse/domestic partner from receiving tuition assistance.

I understand that my child or spouse/domestic partner is responsible for immediate payment to the College of any prorated amount of tuition assistance if I have changed my employment status or changed from a qualifying relationship with my child or spouse/domestic partner during the term in which my child or spouse/domestic partner received tuition assistance, tuition assistance has been applied to any ineligible tuition or fees, or the maximum allowed terms of tuition assistance has been exceeded.

I certify the aforementioned is true and correct. I accept the terms and conditions of my use of the benefit. I understand misuse or misrepresentation may result in denial of tuition assistance.

No more than eight studio terms and one academics-only (ArtCenter Lite) term will be covered per student. **All students, regardless of tuition level, are responsible for paying the \$517 Universal Access Fee, other class and late fees, and lab charges.** Payment is due by the first Friday of the term.

Employee Signature

Date

FOR HUMAN RESOURCES OFFICE USE ONLY			
<input type="checkbox"/> Eligibility Checked: eligible for _____ One Degree Class _____ Pursue a Full Degree Program	DOCUMENTATION:		
Verified by _____ Date _____	<input type="checkbox"/> Attached		
<input type="checkbox"/> Form(s) forwarded to Financial Aid _____ Date _____	<input type="checkbox"/> Provisional		
	<input type="checkbox"/> On File		
FOR FINANCIAL AID OFFICE USE ONLY			
# of Units Registered _____	Remission Amount \$ _____	Terms Used <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	AC Lite <input type="checkbox"/>
1 2 3 4 5 6 7 8			
Posted by _____	Date _____		
<input type="checkbox"/> Copy of completed form(s) forwarded to HR _____ Date _____	<input type="checkbox"/> Copy of completed form(s) forwarded to Accounting _____		