

COOPERATING TEACHER TUITION WAIVER PROGRAM

Waivers expire 1 year after completion of semester with student teacher
 *Waivers are mailed at the end of the semester to make certain the cooperating teacher has completed the term
 Maximum of 12 hours per academic year For use at: Morehead State University

First Name	Last Name	Social Security Number
Mailing Address	City	State Zip
School District	School	Home Phone
Email Address		School Phone Number

This section to be completed by Principal.

I hereby certify the above employee has completed supervision of a student teacher for the Spring / Fall semester of _____.
 This was a/an 8 week / 16 week placement. Year

 Principal's Name Principal's Signature Date

- Indicate the term and year for which this waiver is to be used: ___ Fall ___ Spring ___ Summer & Year _____
- Indicate the total number of tuition credit hours to be utilized for the term listed above: _____
- Name of the student teacher supervised: _____ Name of Institution: _____
 Indicate the term and year you supervised this student teacher: ___ Fall ___ Spring & Year _
- Name of the student teacher supervised: _____ Name of Institution: _____
 Indicate the term and year you supervised this student teacher: ___ Fall ___ Spring & Year _____

Proposed Class Schedule

Dept.	Course & Section Number.	Course Title (This does not replace class registration process)	Semester	Time	Days

"A postsecondary institution shall not be required to establish a course to meet teacher request." (Per KRS Chapter 156, Section9)

DEADLINE DATES FOR PROCESSING

Must submit form by the last day of regular registration *check calendar online

Please email or mail your completed application to:

Quality Assurance and Accreditation:

Dr. Kim Nettleton
 Morehead State University
 801 Ginger Hall
 Morehead State University
 40351

Phone: 606-783-5483
 Email k.nettleton@moreheadstate.edu

When this waiver form has been completed, the student is responsible for completing all necessary processes at Morehead State University.

1. Admission to the institution must be achieved
2. Verify acceptance into your program of study, if applicable.
3. Have your class schedule approved and registered at the institution
(Protect Class Schedule)
4. Submit this waiver form to the Quality Assurance and Accreditation office at MSU.
5. Classes are subject to availability each semester and the subject of all regulations at the institution.

Waivers expire 1 year after completion of semester with the student teacher.

- Graduate courses are taxable benefits, which the student is responsible to report.
- Each student must be in good academic & financial standing at Morehead State University.
- Timely submission of information allows for better processing of the waiver.

Waiver # _____ Date Mailed _____ # of Waivers _____

Anyone using this form in a fraudulent manner is subject to dismissal from the credit granting institution and any legal implication that may apply to fraudulent use. If a person takes classes at more than one institution in one semester, a Statutory Tuition Waiver must be completed for each institution attended.