# UNIVERSITY of HOUSTON

## STUDENT BUSINESS SERVICES

#### Application for Non-Resident Tuition Waiver - Undergraduate Academic Support Assistants

A non-resident teaching/research assistant of a State of Texas institution of higher education may be entitled to resident tuition and fees in accordance with Texas Education Code, Sec. 54.212. For details regarding requirements for this waiver, please visit MAPP11.03.03.

Sec. 54.212. TEACHING OR RESEARCH ASSISTANT. A teaching assistant or research assistant of any institution of higher education and the spouse and children of such a teaching assistant are entitled to register in a state institution of higher education by paying the tuition fees and other fees or charges required for Texas residents under Section 54.051 of this code, without regard to the length of time the assistant has resided in Texas, if the assistant is employed at least one-half time in a teaching or research assistant position which relates to the assistant's degree program under rules and regulations established by the employer institution.

Approved forms must be submitted to Student Business Services located in the Welcome Center by the census day of the respective term (Fall and Spring: 12th class day, Summer: 4th class day).

#### Section A. Student

myUH ID:	Last Name:	First Name:	
Term:	Year:	Degree Plan:	
	□2 0	J	
Fall Spring Summer			
I understand that I meet all requiren	nents for resident tuition based on my sp	consor's employment as outlined in Texas	
	and further explained in MAPP 11.03.03		
	g me ineligible for exemption, I will pay		
deadline as posted on my account. Non-payment will result in cancellation of my registration and/or loss of credit for the			
term.			
		//	
Signature	Print Name	Date	
Section B. Employing Department			
	1	T ====	
Employing Department Name:	Job Title:	FTE:	
Job Duties:			
College Business Administrator Certification: I certify that the student named above has been offered employment			
in the qualified position above and is assigned the job duties provided for the term indicated.			
Signature	Print Name	Date	

### **Section C. Academic Department**

Department Name:		Department Code:		
Academic Faculty Advisor/Program Director Certification: I certify that the duties listed in Section B (or attached) relates to the student's degree program for the term(s) indicated.				
Signature	Print Name	/		
Academic Department Chair Certification: I certify that the duties listed in Section B (or attached) relates to the student's degree program for the term(s) indicated.				
Signature	Print Name	//		
Section D. Student Business Services				
Approved Denied - Reason:				
Bursar Signature	Print Name	/		
bursar Signature	Fillit Name	Date		

Cashier's Office Welcome Center 4434 University Drive, Rm. 114 Houston, TX 77204-6033

> waivers@central.uh.edu 713-743-1010 Option 6

<sup>\*</sup>A separate waiver must be submitted for summer. Student qualifies for a waiver for summer if the student is employed by the 4th day of class through the last day of class of session 1.