



Dependent Tuition Scholarship Application
Fall 2020 & Winter 2021

Date: \_\_\_\_\_

Tuition for: [ ] Child [ ] Spouse [ ] Other Qualified Adult (OQA)

Name of Admitted Student: \_\_\_\_\_ Student UMID # \_\_\_\_\_

Student Email: \_\_\_\_\_

Name of UM Employee: \_\_\_\_\_ Employee UMID#: \_\_\_\_\_

UM Employment Campus Location: [ ] Flint [ ] Ann Arbor [ ] Dearborn [ ] UM Health System

Employee Department: \_\_\_\_\_

Employee Email: \_\_\_\_\_

Please check all semesters for which you are applying (one form may be used for all semesters included on this form):

- [ ] Fall 2020 – Application deadline is Tuesday, September 8, 2020 (2019 tax return)
[ ] Winter 2021 – Application deadline is Wednesday, January 13, 2021 (2019 tax return)

Required Methods of Verification:

Dependent Child: Must submit family’s most recent federal tax form as supporting documentation status of the student (if the faculty/staff member is not able to claim the dependent on their taxes please contact the Benefits Coordinator for more information)

Spouse/OQA (choose one of the following options):

- [ ] Faculty/Staff member provides medical benefits for the spouse/OQA
[ ] Submit family’s 2019 federal tax form showing the spouse/OQA as a dependent
[ ] Provide a certified copy of a marriage certificate
[ ] Verify the OQA qualifies as eligible under Section 152 of the IRS Code for the 2019 tax year

[ ] By checking this box, we confirm that the student listed above is an IRS-dependent child, an IRS-dependent child of a spouse, or an Other Qualified Adult living in the same home of the unit member, spouse or OQA (based on eligibility guidelines). We also give permission to the Office of Financial Aid and Scholarships and the Human Resources Office to confirm employment/benefits status now and every semester. Our signatures below certify that the information on this form and in the supporting documentation is accurate as of the date listed above.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Faculty/Staff Signature

Please deliver the completed application, including any supporting documentation, by the appropriate deadline to:

Human Resources, 213 University Pavilion

Deadlines will be strictly enforced

OFFICE USE ONLY

Date HR received application: \_\_\_\_\_

Date HR received supporting documentation (if different than application): \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

- [ ] Approved
[ ] Not Eligible – Reason: \_\_\_\_\_