

RUTGERS THE STATE UNIVERSITY
TUITION REMISSION APPLICATION – GRADUATE STUDENTS
For Fellows or students receiving department scholarships who are eligible for tuition remission.

Name _____
Last (Please Print) First

Address _____ RUID# _____

Student Signature _____ School # _____
I hereby claim Tuition Remission and attest this information is correct

THIS SECTION MUST BE COMPLETED AND AUTHORIZED BY THE DEPARTMENT GRATING REMISSION.

Appt. Title: Fellow _____ Other _____ Salary _____

Fall _____ Spring _____ Summer _____ Effective Date _____

Acct # to be charged for tuition remission _____

Acct # to be charged for computer fee _____ College Fee _____

Department Employed _____ Phone Ext. _____

Authorized Signature _____

RT100

Return completed form with Term Bill