## 2023-2024





Deadlines (Based off drop deadlines according to the office of the Registrar)			
<u>Fall</u>	<u>Interim</u>	<u>Spring</u>	<u>Summer</u>
<u> </u>		January 22, 2024	
Term(s) applying for: Fall 2023 Interim 2023 Spring 2024 Summer 2024 *I understand if I miss the deadline to turn in the application, I will not receive the grant for previous terms.			
Student Information			
Student Name			
BEAR #	Date of I	Birth(Ar	n eligible child must be under age 25)
Address			
City		_ State Zip Code	e
Phone NumberEmail			
Program Level Undergraduate			
Degree Program			
Study abroad & the MBA program are not covered under the tuition grant			
EMPLOYEE Information			
Employee name	BEAR #		
Employee Classification	Faculty [	Professional Administrative	Classified
REQUIRED CHECKLIST (If any section is not completed, your grant paperwork will not be accepted)			
Is the student your spouse? (Attach proof of marriage) <b>OR</b>			
• Is the student your eligible child under the age of 25? (Attach proof of dependency)			
Did the student apply for FAFSA and COF? (Please apply before completing paperwork)      Did the student apply for the LINC ask planship?			
<ul> <li>Did the student apply for the UNC scholarship?</li> <li>Is the student classified as an in-state Colorado resident? (If not, you understand you are liable</li> </ul>			
for the out-of-state tuition portion until you apply and are accepted as an in-state Colorado resident).			
**Dependents are required to apply for FAFSA, COF and the UNC Scholarship			
By signing below, we, the Employee and the Dependent (as listed above), acknowledge that we understand the above			
information and guidelines listed in the board policy for receiving Dependent Tuition Grant. We also understand that we			
may be subject to taxation under IRS Code section 117 or IRS Code Section 127. (See Payroll website at			
http://www.unco.edu/payroll/ for the schedule of taxation.)			
Employee's Signature			
Student's Signature		D	ate
To be completed by human resources			
Employee FTEDOH_	HR Signature		Date

## 2023-2024

## **Dependent Tuition Grant Application**



## Dependent definitions

**Eligible Dependent:** Eligible dependents are specified in statutes, primarily § 24-50-603(5), C.R.S., as modified or further defined by other state statutes (e.g., Title 10) or federal regulations (e.g., Affordable Care Act [ACA], IRC on taxable income).

- A. Current Spouse, including Common Law Spouse and Domestic Partnership
  - 1. Spouse means a spouse as recognized under federal tax law.
  - 2. Common Law Spouse means an adult,
    - a. Who is at least 18 years of age; and
    - b. With whom the Employee cohabitates; and
    - c. Who represent themselves to the community as married to each other; and
    - d. There is no legal impediment to the marriage.
- B. A child include:
  - a. a biological or natural child;
  - b. a legally adopted child;
  - c. a child legally placed for adoption or foster care;
  - d. a step child as long as the employee and natural parent are married;
  - e. a child of a partner in a civil union as long as the employee and parent are in a committed relationship; and
  - f. a child for whom the employee has a court order granting legal custody or parental responsibility that specifies the employee is responsible for providing health insurance coverage.

Acceptable Dependent Verification Documents			
DEPENDENT	Required documents		
Spouse	Registered marriage certificate		
Common-law Spouse/ Domestic Partnership	<ul> <li>Common-law affidavit OR</li> <li>Domestic Partnership Affidavit</li> <li>AND a document dated within the last 60 days showing current relationship status, such as a joint household bill or joint bank/credit account, etc.         The documents must be dated and list your partner's name at your mailing address.     </li> </ul>		
Children	<ul> <li>A copy of the child's birth certificate or adoption certificate, naming you or your spouse/Civil Union Partner as the child's parent;</li> <li>OR appropriate custody or allocation of parental responsibility naming you or your spouse or Civil Union Partner as the responsible party to provide insurance for the child.</li> </ul>		