

Employee/Dependent/Spouse Registration Form (Please fill out one form per term; paper registration only)

SEU Employee Information

REG Jul 20

Human Resources

Employee

Last Name	First Name			Power Campus ID#			
Department	rtment Position/Title			Hire Date			
Please check on	e that applies	to the SEU Employee:	☐ Full tin	ne employee	☐ Part time	e employee	
For tuition re	mission/fiscal	l year information please	refer to pag	ge 2 of this for	m		
Dependent/S	Spouse Info	ormation					
Last Name		First Name					
Relation to SEU	Employee, pl	lease check the one that	applies:	Depender	nt 🔲 Spou	ise	
	-	ents are required to file a to qualify for any tuition				d Floor Santa Rita	
-	•	onal to file a FAFSA. Pleas must fill out a FAFSA forr	-				
Yes, I plan to ap	ply for Financi	ial Aid No	, I do not pla	an to apply for	Financial Aid _		
* If you are takin	ıg SEU classes	for the first time, you mu	ust complete	e an application	n at <u>www.steu.</u>	edu/apply.	
Undergraduate	Program	Graduate Prog	ıram	-			
**** Tuition Remis	sion benefits d	o not apply to Independent	t Studies, Inter	rnships or Certif	cates ****		
Course ID	Section	Days/Times	Credits	Year	Term	Session	
1) Employee signature					Date		
2) Dependent/Spouse signature					Date		
3) Supervisor signature					Date		
4) Advisor signature					Date		
5) Director, Human Resources signature					Date		
6) Processed by Registrar					Date		
		the semester in which they are course(s) taken by dependen	_	-	igated to pay for	the full cost of the	

Financial Aid

Business Office