

Teaching/Research Assistant Waiver Form
Texas A&M University – Corpus Christi
(To qualify for the Resident Tuition rate under Education Code, Title 3)

I. CERTIFICATION OF EMPLOYMENT AS A TEACHING/RESEARCH ASSISTANT.

First	Middle	Last	Student ID Number
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Employed by _____ Student E-Mail _____

Employee's Title	Hours/Week
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College/Department	Date of Employment
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Term Applied for (please choose only one):

Fall Term Spring Term Summer I Summer II

II. ADDITIONAL CERTIFICATION FOR TEACHING/RESEARCH ASSISTANTS.

This is to certify that the work to be performed by the employee named in Section I above relates to his or her degree program as follows: (Explain briefly).

College/Department: _____

Dean or Chair Signature	Date
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III. STATEMENT BY STUDENT.

I understand if, upon audit, I am found ineligible for resident tuition, the tuition rate will be changed to the non-resident rate and I agree to pay, upon demand, any additional tuition and fees. I understand that failure to pay may result in additional collection costs.

Student's Signature	Date
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_____ *I am aware the waiver approval process must be completed for each semester requested.*

Initial

IV. GRADUATE STUDIES OFFICE APPROVAL.

Received appropriate documentation for approval Denied

Signature	Date
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EMPLOYMENT MUST BE EFFECTIVE ON OR BEFORE 12TH CLASS DAY OF A REGULAR SEMESTER OR 4TH CLASS DAY OF SUMMER TERM. THIS FORM MUST BE SUBMITTED ONCE PER ACADEMIC YEAR HOWEVER GAS APPOINTED FOR MORE THAN ONE SEMESTER WILL COMPLETE AND SUBMIT A REAFFIRMATION FORM ONLINE CONFIRMING THEIR ELIGIBILITY TO RECEIVE IN-STATE TUITION.

PROCEDURES

1. Section I is filled out by student with information that is included in the documentation that is provided to the Graduate Office. A letter from the employer may be turned in with the documentation.
2. Section II must be completed by the college dean or chair in the student's major area.
3. Section III is completed by the student and submitted to the College of Graduate Studies (CGS) in FC 178. Completed, routed, and approved payroll documents will be used to certify that the student meets all the requirements for the Research/Teaching Assistantship Waiver, including the official title, percentage of effort, hours per week, employing department, employment date and any other information deemed necessary.
4. The form is due no later than the 1st class day of the semester in which the student is requesting the initial waiver.
5. The College of Graduate Studies processing period to review this form is 3-5 business days. The waiver decisions are communicated to the Business Office, if approved.

Note: To receive in-state tuition rates, students must be in good academic standing with a GPA of a 3.0 or above, must maintain a graduate course load of at least 6 hours during long semesters or 3 hours during the summer session (Individual programs/departments/colleges may have additional qualification requirements). **Out-of-state tuition waivers will be rescinded if students register for too few hours or are not working in the qualifying position by the 12th class day of long semesters and the 4th class day of summer semesters.**

FOR GRADUATE OFFICE USE ONLY:

Program Entry: _____	<u>Science & Engineering Signature:</u>
	<input type="checkbox"/> Frank Pezold, Dean
GGPA: _____	<input type="checkbox"/> David Moury, Assistant Dean
Graduate Hours Enrolled: _____	<input type="checkbox"/> Lea-Der Chen, Assistant Dean
Sent E-Mail to Business Office: _____	Date Sent: ____/____/____
SPACMNT: ____/____/____	Notes: _____
SGAASST: ____/____/____	