AFFIDAVIT FOR TUITION REMISSION FOR DEPENDENT CHILDREN AND STEPCHILDREN

Bentley's Tuition Remission policy provides tuition remission benefits to "dependent" children and stepchildren of eligible full-time faculty and staff employees. To be considered a "dependent" child or stepchild under the Internal Revenue Code (IRC), the child must meet the criteria for being either a "Qualifying Child" or a "Qualifying Relative". Please complete either the Qualifying Child Questionnaire or the Qualifying Relative Questionnaire (not both) so that Bentley can determine whether your child will be considered a qualifying dependent under the Tuition Remission policy.

You must submit a completed Tuition Remission Form in addition to this Affidavit and Questionnaire. All documents must be submitted to Human Resources, Rauch 201 no later than two weeks prior to the start of the course. HR will notify you whether your child is eligible for tuition remission.

Please see the full Tuition Remission policy for other eligibility criteria and a full description of the process for applying for tuition remission.

DECLARATIONS		
I am submitting this Affidavit as part of my applicatio	n for tuition remission benefits for my le relationship/name). I attest that this	
Affidavit and the accompanying Qualifying Child Questionna true and accurate. I acknowledge that the information I am p for tuition remission.	, ,	
ACKNOWLEDGEMEN	ITS	
1 I affirm that the Declarations above and in the ac-	companying Questionnaire(s) are true and	

- 1. I affirm that the Declarations above and in the accompanying Questionnaire(s) are true and complete to the best of my knowledge.
- 2. I understand that any misrepresentation or omission in this Affidavit, accompanying Questionnaire, or Tuition Remission Form may result in the immediate termination of my employment.
- 3. I understand that if I have any questions about completing this Affidavit, the accompanying Questionnaire, or the Tuition Remission Form, I should consult with my own legal and/or tax advisors before doing so.
- 4. I understand that the information provided in this Affidavit and accompanying Questionnaire is for use by the Human Resources Department for the sole purpose of determining my child's or stepchild's eligibility for tuition remission benefits.

Employee's name (print)	Date	_
Employee's Signature		