

TUITION WAIVER PROGRAM DEPENDENT CERTIFICATION FORM

Please print all information.

In accordance with the Northeastern University Tuition Waiver policy, I hereby certify that the student named below is:

	My unmarried son, daughter, stepchild, or leg dependent on my most recent federal tax ret	gally adopted child and this student was claimed as a urn.
	My unmarried son, daughter, stepchild, or legally adopted child who otherwise meets the definition of dependent, but who is not listed as a dependent on my most recent federal tax return due to a domestic elations order. Endent children must remain a dependent during their entire course of study. In request, I agree to provide to HRM/Benefits a copy of the federal tax return verifying the dependent as of this student, or, if applicable, a copy of the domestic relations order verifying the dependent status e student.	
De	pendent children must remain a dependent	during their entire course of study.
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Em	ployee's Signature	Date
Academic Term(Fall, Winter, Spring, Summer 1 or Summer 2)		Academic Year
Student's Name		Student's NU ID
Stuc	lent's Date of Birth	
Employee's Name		Employee's NU ID
Dep	artment Campus Mailstop	Campus Extension

Mail completed Dependent Certification Form and Tuition Waiver Form to *Human Resources Management*, 250 Columbus Place or fax to 617-373-7610. If additional information is needed you will be notified in writing.