



SCHOOL DISTRICT DISCOUNT EMPLOYMENT VERIFICATION FORM

PROCEDURES FOR COMPLETING THE DISCOUNT FORM:

- 1. Please read and understand the terms and conditions of the school district discount.
- 2. Complete this form for EACH semester you are enrolled and qualify for the discount.
- 3. Submit the form to your Human Resources Department to have an HR official verify:
 - Discount applicable to OLLU courses only
 - Discount is not retroactive
 - Discount not applicable if receiving any reduced tuition rate)
 - Doctoral students are not eligible for the discount
 - Discount cannot be combined with other University funding

*Contact the Financial Aid Office at (210) 434-6711 ext. 2299 if you have any questions.

STUDENT USE ONLY:

Name (Please PRINT): _____ Student ID#: _____

School District Employed at: _____

ADMIT STATUS: () Undergraduate Student () Graduate Student

YEAR: _____ TERM: () Fall () Spring () Summer

By signing below, I authorize the Financial Aid Office of Our Lady of the Lake University to verify my full-time employment status only.

Student Signature: _____ Date: _____

The Financial Aid Office will e-mail you at your Lake Account if there are any questions or concerns regarding your discount.

SCHOOL DISTRICT HR ADMINISTRATOR USE ONLY:

I hereby certify that the individual named above works for the indicated school district as a full-time employee.

Name of HR Administrator (Please Print): _____ Wk#: _____

Signature: _____ Date: _____

FINANCIAL AID OFFICE USE ONLY:

Discount Amount: _____

_____ Undergraduate 20% _____ Graduate 20% _____

v š Ć Ç W _____ Date: _____