

**HARTFORD CONSORTIUM FOR HIGHER EDUCATION
EMPLOYEE COURSE REGISTRATION REQUEST- TUITION REMISSION FORM**

General

Employees should review ALL guidelines and registration requirements on the Hartford Consortium website. (www.hartfordconsortium.org/programs/cross-registration). Links to each institution's course catalog are available on the website.

Eligibility:

Full-time employees at *private Consortium institutions, Capital and Charter Oak*, as well as affiliates, are eligible for course enrollment. Employees may enroll in *ONE* course per semester, including one winter or summer session (undergraduate and master's level courses only). Fees for employees are outlined below. You must adhere to deadlines of the *host* college/university in order to enroll and/or withdraw from any course. If you withdraw from a course, you are responsible for notifying both *host* and *home* institution.

Fee Schedule: Full member institution employees and HCHE staff will not be charged for courses. Employees are responsible for all fees such as lab fees and books associated with courses, regardless of full or associate institution status. There are tax implications for some course work so you are urged to check with the IRS to determine if you have a tax liability.

Last Name	First Name	Middle
Mailing Address (Street, PO, City, State, Zip)		
Institution Dept.	Phone #	Employee ID #
Supervisor Name	Title	

I certify that I am a full-time employee at:

- | | | |
|--|--|--|
| <input type="checkbox"/> Capital Community College | <input type="checkbox"/> Charter Oak State College | <input type="checkbox"/> Goodwin College |
| <input type="checkbox"/> Hartford Consortium | <input type="checkbox"/> Hartford Seminary* | <input type="checkbox"/> Rensselaer at Hartford <input type="checkbox"/> |
| <input type="checkbox"/> Saint Joseph College | <input type="checkbox"/> St. Thomas Seminary* | <input type="checkbox"/> Trinity College |
| <input type="checkbox"/> University of Hartford | <input type="checkbox"/> CPTV** | |
- *Affiliate **Associate*

Requesting enrollment in Fall Winter Spring Summer 20____ for course:

INSTITUTION	COURSE #	DAYS/TIMES	COURSE TITLE	FEES

REQUIRED SIGNATURES: Employees are responsible for obtaining ALL signatures prior to enrolling in any course. Signatures indicate registration has been approved by both institutions. Form should be submitted to *host* institution Registrar Office during the first week of classes when space availability will be determined.

Employee Signature	Date
Supervisor Signature/ <i>Home</i> Institution	Date
Human Resources Officer Signature	Date
Host Institution Registration Officer Signature	Date