EASTERN CONNECTICUT STATE UNIVERSITY
REGISTRATION FEE WAIVER FOR CLASSIFIED EMPLOYEES

PART A – To be completed by Employee and sent to the Bursar’s Office

NAME _____
HOME ADDRESS _____
_____
JOB TITLE _____
BARGAINING UNIT _____
ECSU ID # _____

PART TIME ENROLLMENT

UNDERGRADUATE ☐ GRADUATE ☐

SEMESTER AND YEAR _____

I certify that the above statements are true and correct.

_________________________________________  _______________
Signature                        Date

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PART B – To be completed by the Office of Human Resources

☐ Thirty Five Dollars ($35.00) Waiver Approved

☐ This Application is rejected for the following reason: _____

_________________________________________  _______________
Human Resources Approval                 Date