Duke University Children’s Tuition Grant Program Instructions (Revised June 2017)

Parent’s Instructions:

1. Please complete and sign the first page of the Duke University Children’s Tuition Grant application, and forward both pages to the appropriate department at your child’s college or university. **Completed applications must be received by Duke Benefits within 90 days after the end of the application semester/quarter.**

2. If you are completing the application for a new student, a copy of their birth certificate is required; if you are completing an application for a stepchild, a copy of your marriage certificate is also required. Both certificates should be submitted to the Benefits Office and will be held until the completed application is received. (The birth and marriage certificates are the only documents that can be faxed to 919-681-8774.)

3. Be sure to certify whether or not your child is an eligible dependent in accordance with the Working Families Tax Relief Act (“WFTRA”).

4. **Please direct the college or university to return the completed form by mail to Duke University Benefits, Box 90502, 705 Broad Street, Durham, NC 27708-0502.**

5. Upon receipt of the completed application, Benefits will determine eligibility, calculate the tuition grant payable, and request that the payment be processed. The grant will be paid in US dollars only. Confirmation of payment will be sent to the e-mail address provided on your application. Accounting Services will process the payment request. Payment is mailed to the college or university within 7-10 business days. **(Note: Payments for the fall semester are paid after the start of our fiscal year, July 1).** If there are questions regarding your application, you will be contacted by the Benefits Office.

6. You only need to contact the Benefits Office if you do not receive a confirmation of payment e-mail within 10 business days of submission by the school of the completed application. Please contact the school to verify the date the application was mailed to the Benefits Office. Questions may be directed to Benefits via e-mail at benefits@duke.edu.

Institution Instructions

1. Once the student is registered, please complete the registration information requested in items 1-7 on page 2 of the enclosed Duke University Children’s Tuition Grant application form. Be sure to include an official institution seal or stamp in section 7.

   **Please return the completed form by mail to:**
   Duke University Benefits
   Box 90502
   705 Broad St.
   Durham, NC 27708-0502

   Please note: No faxes or earlier versions of the application will be accepted.

2. The Duke University Children’s Tuition Grant is applicable to **tuition expenses only**. Please exclude any fees or other charges from reported tuition amounts. Please also include actual amounts; Duke is unable to authorize a payment based on estimated amounts.

**Determination of Award Amounts:** All institutions to which Duke University tuition grant payments are directed will be required to refund to Duke University any credit balance (up to the amount of the Duke tuition grant) that occurs after the Duke University tuition grant payment and all other scholarships, grants, or other forms of assistance (excluding loans and payments by the student or his/her parent) are applied.

**Scholarships:**

- If the scholarship is **not designated** towards tuition and **not greater than room, board, and fees**, then the scholarship has no impact on the Children’s Tuition Grant payment.
- If the scholarship is **not designated** towards tuition and **is greater than non-tuition costs** (room, board, and fees), then the amount over the non-tuition costs will be deducted from the tuition grant payment and the deductible still applies.
- If the scholarship is **designated towards tuition**, then any amount over the deductible will reduce the amount of the tuition grant payment.
DUKE UNIVERSITY CHILDREN’S TUITION GRANT PROGRAM (2017/2018)

Please read the accompanying instructions for completing this form for the 2017/2018 academic year. Please Note: Completed applications must be received by Duke Benefits within 90 days of the end of the application semester/quarter. **NO FAXES OR EARLIER VERSIONS OF THE APPLICATION WILL BE ACCEPTED.** Information about determination of tuition grant amounts is available at:
https://hr.duke.edu/benefits/educational-benefits/childrens-tuition-grant

**To Be Completed By Parent/Employee:**

<table>
<thead>
<tr>
<th>Have you ever used this program for Student Name: _________________________?</th>
<th>☐ Yes ☐ No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent Name:</td>
<td>Duke ID:</td>
</tr>
<tr>
<td>Parent Address:</td>
<td>City:</td>
</tr>
<tr>
<td>Work Phone:</td>
<td>Payroll Frequency:</td>
</tr>
<tr>
<td>Home Phone:</td>
<td>☐ Biweekly ☐ Monthly If provided, we will send an e-mail confirming payment (if eligible) within 10 business days of receipt of completed application.</td>
</tr>
<tr>
<td>Employed at:</td>
<td>Employment Status:</td>
</tr>
<tr>
<td>☐ University/Medical Center ☐ Health System*</td>
<td>☐ Full-Time ☐ Duke Disability</td>
</tr>
<tr>
<td>☐ Health System* Please see eligibility criteria at:</td>
<td>☐ Eligible Retiree ☐ Lay-Off</td>
</tr>
<tr>
<td><a href="https://hr.duke.edu/benefits/educational-benefits/childrens-tuition-grant/employee-eligibility">https://hr.duke.edu/benefits/educational-benefits/childrens-tuition-grant/employee-eligibility</a></td>
<td>☐ Surviving Spouse</td>
</tr>
<tr>
<td>Student Name:</td>
<td>Student ID#:</td>
</tr>
<tr>
<td>(New students must provide a copy of birth certificate or adoption papers to certify eligibility)</td>
<td></td>
</tr>
<tr>
<td>Student is my:</td>
<td>☐ Natural ☐ Adopted ☐ Stepchild* ☐ Dependent of Same-Sex Spousal Equivalent</td>
</tr>
<tr>
<td>*A copy of the marriage certificate is required.</td>
<td></td>
</tr>
<tr>
<td>College/University:</td>
<td></td>
</tr>
<tr>
<td>Currently, this benefit is not considered taxable income for most eligible participants. However, if your child does not qualify as a dependent in accordance with the Working Families Tax Relief (&quot;WFTRA&quot;), then the benefit will be considered taxable income to you.</td>
<td></td>
</tr>
<tr>
<td>For purposes of the Children’s Tuition Grant program, I understand that my child qualifies as a dependent, as defined by “WFTRA”, if s/he: (1) lives in my home for over half the year, temporary absence because of special circumstances, including education does not prevent the dependent from qualifying. (2) is my child, stepchild or adopted child, and (3) is a student under 24 years of age and does not provide over half of his or her own support for the year. For more details on dependents you may wish to see IRS Publication 501. Please consult your own tax advisor if you have additional questions.</td>
<td></td>
</tr>
<tr>
<td>☐ I certify that my child IS an eligible dependent as defined by “WFTRA” (an IRS rule and regulation).</td>
<td></td>
</tr>
<tr>
<td>☐ I certify that my child IS NOT an eligible dependent as defined by “WFTRA” (an IRS rule and regulation).</td>
<td></td>
</tr>
<tr>
<td>(If your child is not a dependent, as defined by IRS rules and regulations, the Children’s Tuition Grant benefit will have taxes withheld and will be reported as taxable income to you.)</td>
<td></td>
</tr>
<tr>
<td><strong>Important Notice:</strong> Your benefit and eligibility for coverage in this plan will be immediately terminated if you provide fraudulent or misrepresented information. This includes, but is not limited to, fraudulent statements or material misrepresentation of facts. Your other Duke-sponsored benefit plans may also be terminated. Employment with Duke may also be terminated for providing fraudulent or misrepresented information. More information is available at <a href="https://hr.duke.edu/benefits/summary-plan-descriptions">https://hr.duke.edu/benefits/summary-plan-descriptions</a>.</td>
<td></td>
</tr>
<tr>
<td>I certify that all of the above information is correct and I understand the important notice listed above.</td>
<td></td>
</tr>
<tr>
<td>Parent/Employee Signature – (Required)</td>
<td>Date</td>
</tr>
</tbody>
</table>
DUKE UNIVERSITY CHILDREN’S TUITION GRANT PROGRAM (2017/2018)

Parent Name:

To Be Completed By School (once student is registered):

1. Student Name ___________________________ Student ID ___________________________

2. a) Student registered as Full-time? ☐ Yes ☐ No
   b) Is student a candidate for ☐ Associate ☐ Bachelor’s degree?

3. Student is registered for: (Select Only One Term)
   Semester: ☐ Fall 2017 ☐ Spring 2018 ☐ Summer I 2018 ☐ Summer II 2018 ☐ Full Summer 2018
   Quarter: ☐ Fall 2017 ☐ Winter 2017 ☐ Spring 2018 ☐ Summer 2018
   Trimester: ☐ Fall 2017 ☐ Spring 2018 ☐ Summer 2018

4. Tuition only for the term indicated in #3 above (4a).
   Please check one:
   ☐ On-campus student - please indicate the actual charges for room & board (4b).
   ☐ Off-campus student - please indicate the standard charges for room & board for an on-campus student (4b).

   4a. $ ___________________________ Tuition Only
   4b. $ ___________________________ Room & Board
   4c. $ ___________________________ Fees

5. Scholarships, grants, or other forms of assistance being received this term (excluding loans, work study, and payments by the student or his/her parent) (5a/5b).
   Please include actual amounts; payment cannot be made for estimated amounts.

   5a. $ ___________________________ Designated for Tuition
   5b. $ ___________________________ Undesignated Aid

6. The remittance should be mailed to:

   Individual and/or Office ____________________________________________________________________________
   Institution (Payable to Institution Only) ____________________________________________________________________________
   Address (including City, State, and Zip) ____________________________________________________________________________

7. All institutions to which Duke University tuition grant payments are directed will be required to refund to Duke University any credit balance (up to the amount of the Duke tuition grant) that occurs after the Duke University tuition grant and all other scholarships, grants, or other forms of assistance (excluding loans and payments by the student or his/her parent) are applied.

   I certify the above information is correct. ____________________________________________________________________________
   Institution stamp/seal (required):
   Certifying Officer’s Signature and Date ____________________________________________________________________________
   Printed Name and Title of Certifying Officer ____________________________________________________________________________
   E-mail Address ____________________________________________________________________________
   Telephone Number ____________________________________________________________________________
   School Name ____________________________________________________________________________

DUKE UNIVERSITY APPROVAL FOR PAYMENT (DUKE UNIVERSITY USE ONLY)

☐ Plan 1 ☐ Plan 2 ☐ Plan 3

Approved Amount: ____________________________________________________________________________

Authorized Signature and Printed Name ____________________________________________________________________________

$ ___________________________ Title and Date ____________________________________________________________________________

College or University should mail completed form to:

Duke University Benefits
Box 90502
705 Broad Street
Durham, NC 27708-0502

(Please note: No faxes or earlier versions of the application will be accepted.)