

Stephen F. Austin State University
NONRESIDENT TUITION EXEMPTION FOR FACULTY

RULES OF ELIGIBILITY FOR WAIVER

Teachers or Professors who are employed at least one-half time on a regular monthly basis by a Texas institution of higher education are entitled to register themselves, their spouse, and their children in a Texas institution of higher education by paying the tuition and fees required of Texas residents.

Texas Education Code, § 54.211. Faculty and Dependents

A teacher or professor of an institution of higher education, and the spouse and children of such a teacher or professor, are entitled to register in an institution of higher education by paying the tuition fee and other fees or charges required for Texas residents without regard to the length of time the teacher or professor has resided in Texas. A teacher or professor of an institution of higher education and the teacher's or professor's family are entitled to the benefits of this section if the teacher or professor is employed at least one-half time on a regular monthly salary basis by an institution of higher education.

Transferred and redesignated from Education Code, Section 54.059 by Acts 2011, 82nd Leg., R.S., Ch. 359 (S.B. 32), Sec. 1, eff. January 1, 2012.

For the purposes of this law, a person is a teacher or professor if he or she has a rank including the word professor, lecturer or instructor.

FOR COMPLETION BY STUDENT AND PARENT OR SPOUSE

Exemption is for: FALL 20 __ SPRING 20 __ SUMMER 20 __

Certification: I certify that I qualify for an exemption from nonresident/international tuition based on the above conditions and the information provided by me is true and correct. I understand that exemptions are subject to audit and that I may be required to provide documentation to support this request. I also understand that if the exemption is subsequently denied because it is shown that I fail to qualify under the rules established by the Texas Legislature and Stephen F. Austin State University, I will be responsible for the immediate payment of all tuition amount waived by means of this request and all penalties as required by law:

Student's Name: _____
Last First MI. SSN Campus ID#

Student's Signature: _____ **Date:** _____

Parent /Spouse: _____
Last First MI. SSN / UIN#

TO BE COMPLETED BY EMPLOYING DEPARTMENT

I certify that employment is being provided according to the conditions and information provided above:

Name of Employing Department: _____

Signature-Head of Employing Department: _____ **Date:** _____

RETURN FORM TO:

Employing Department OR

If the qualifying teacher or professor is working at institution of higher education other than Stephen F. Austin State University, present the complete form and a letter from the employing institution to: Stephen F. Austin State University, PO Box 13051, SFA Station, Nacogdoches, TX 75962