

Staff Spouse RECIPROCAL EDUCATION AGREEMENT

- Please note this form does not work for UI classes

Staff Spouse Reciprocal Education Agreement for: Lewis-Clark State College, College of Western Idaho

PLEASE PRINT

Name of Spouse: _____ Spouse Social Security #: _____

Name of Employee: _____ Employee Vandal Number: _____

Semester Requesting: _____

Spouse wishes to Attend: _____

(Please choose from the list above)

Course Number & Title: _____

Employee has been employed at University of Idaho since: _____

The reciprocal education agreement is available to University of Idaho employees on board appointment, half-time or greater, working at least five months and their spouses:

- ✓ The value of the tuition reduction received for graduate work is taxable income to the employee.
- ✓ Each Idaho institution under the jurisdiction of the State Board of Education shall determine the eligibility for their institution, this is subject to change at any time.
- ✓ Employees seeking the tuition reduction should use the employee reciprocal education agreement form.

HR Benefit Specialist Signature: _____ Date: _____

Employee Date of Hire: _____