



HU/HUCTW EDUCATION FUND



APPLICATION FORM

Read entire Application Guidelines section before filling out this form. Entire form must be completed.
Reminder: TAP eligible applicants may not apply to the Education Fund unless they have exhausted the \$5250 limit.

Harvard ID#: Department: _____

Name: First _____ MI _____ Last _____

Email Address: _____ Daytime Phone #: (____) _____

Home Address: _____

City: _____ State: _____ Zip: _____

Date of Hire/Appointment: ____/____/____ Years of Service: _____

1. Semester: Fall Spring Summer Other : _____
2. Type of Course: Test Prep Conference/Seminar Other TAP ineligible course
 TAP funds have been exhausted Course that did not receive a passing grade/Less than 3 months of employment
3. School/Program offering the course: _____
Degree/Program _____ Total # of courses taken this semester: _____
Course Title: _____ Credit Hours: _____
4. Total Course Cost: _____ (tuition only)

Document name	Check off if the document is attached.	If not yet available, by what date do you expect to turn in the document?
1. Course description		
2. Tuition cost		
3. Proof of payment (see Guidelines, p. 2)		
4. Grade or proof of course completion (if available)		

Your application will not be processed without documents 1, 2 and 3.

_____ Signature of Staff Member:	_____ Date
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