



FREED-HARDEMAN
U N I V E R S I T Y

CHRISTIAN SCHOOL EMPLOYEE DISCOUNT POLICY

Freed-Hardeman University offers tuition remission to students who are **dependents** of a parent, or parents, who are **full-time** in the specific Christian ministries sponsored by the churches of Christ. This work may be verified annually.

The discount is available to children who are enrolled in an undergraduate program and are classified as dependent for federal tax and financial aid purposes. Provided there is no change in employment, discount is available up to a maximum of eight semesters. This discount, along with other institutional aid, cannot exceed the institutional cap.

Employment eligible for the tuition remission includes:

- I. CHRISTIAN SCHOOL FACULTY/STAFF
\$2,500 discount per semester

The discount is awarded to dependent children of full-time employees of any K-12 Christian school with membership in the National Christian School Association (NCSA).

- II. CHRISTIAN COLLEGE/UNIVERSITY FACULTY/STAFF
\$5,000 discount per semester

The discount is awarded to dependent students whose parents are full-time employees of the following Christian Universities: Abilene Christian University, David Lipscomb University, Faulkner University, Harding University, Lubbock Christian University, Oklahoma Christian University, Heritage Christian University, and Pepperdine University.

Complete the parent section of the Employment Verification Form then present the form to a school official (school or university employees.)

First-time freshmen: Return the completed form no later than **April 15**
Transfer students: Return the completed form no later than **June 15**

Office of Financial Aid
Freed-Hardeman University
158 E. Main Street
Henderson, TN 38340
Fax: 731-989-6775
Email: finaid@fhu.edu



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The information below must be completed and postmarked before the noted deadlines.

PARENT SECTION

STUDENT NAME: _____

SOCIAL SECURITY NUMBER: _____

INTENDED TERM OF ENROLLMENT: FALL _____ SPRING _____ SUMMMER _____

NAME OF PARENT/EMPLOYEE: _____

EMPLOYER SECTION

SCHOOL/UNIVERSITY:

ADMINISTRATOR: _____

TITLE: _____

This is to verify that the above-named parent is a full-time employee and is eligible for the Freed-Hardeman University Christian School Discount policy according to the guidelines on the reverse side of this form.

signature

date