2019-2020
Child of Employee 50% Tuition Waiver Benefit Utilization Record (B.U.R. Form)

Public Act 90-0282
Instructions: The following information must be completed by the student each academic year, and sent to the Office of Student Financial Aid where the student will be attending. For addresses, see attachment. The eligible parent must complete an application for the waiver through Human Resources at their employing university once per school that the student attends while using this waiver.

PART A:
Student Name:__________________________________ Birth Date:__________ University ID #:___________________
Street Address:________________________________________ Local Phone #:___________________
City/State/Zip Code:_________________________________ Academic Term: FA_____ SP_____ SU_____
University:________________________________________________________________________________________
(Name of University Student is attending)
Major:_________________________________________________ Expected Graduation Date:____________________

PART B:
Have you used the 50% Child of Employee Tuition Waiver benefit at ANY campus of the following universities? (Chicago State University, Eastern Illinois University, Governors State University, Illinois State University, Northeastern Illinois University, Northern Illinois University, Southern Illinois University, University of Illinois, or Western Illinois University.)
☐ Yes (If “Yes,” complete PART C.)
☐ No (If “No,” proceed to PART D.)

PART C:
University academic terms during which the 50% tuition waiver benefit was utilized:
Name of University:__________________________________ Semester/Year:____________________
Name of University:__________________________________ Semester/Year:____________________
Name of University:__________________________________ Semester/Year:____________________
Name of University:__________________________________ Semester/Year:____________________
Name of University:__________________________________ Semester/Year:____________________
Name of University:__________________________________ Semester/Year:____________________
Name of University:__________________________________ Semester/Year:____________________
Name of University:__________________________________ Semester/Year:____________________

PART D:
I hereby declare that all previous or concurrent academic terms during which the 50% Child of Employee Tuition Waiver benefit was utilized are accurately accounted for above. I request and understand that this information may be verified by means of accessing university records and that the total 50% Child of Employee Tuition Waiver benefits granted to me may not exceed the 4-year (8 semester) limitation established in P.A. 90-0282. A separate “Tuition Waiver Benefit Utilization Record” (BUR) must be completed by the student where he/she is currently enrolled, pursuant to P.A. 90-0282.

Student Signature:________________________________ Date:______________________________

FOR OFFICE USE ONLY: 50% tuition waiver benefit utilization record confirmation (optional as requested by the tuition waiver granting institution): In accordance with institutional standards for tuition waiver benefit utilization, the record outlined above is correct. Name: ___________________________________________ Date:______________________________

Authorized signature of record confirmation by the Financial Aid Office Date:______________________________
University of Illinois at Chicago

Employee Contact:
Academic Human Resources/Records
400 HRB, 715 South Wood, MC-900
Chicago, IL 60612
(312) 413-3490  Fax: (312) 996-1803

Student Contact:
Student Financial Aid Office
1800 SSB, MC-334
Chicago, IL 60607
(312) 996-3126  Fax (312) 996–3385
http://www.uic.edu/depts/financialaid/

University of Illinois at Springfield

Employee Contact:
Department of Human Resources
HRB 30, UIS, P.O. Box 19243
Springfield, IL 62794-9243
(217) 206-6652  Fax: (217) 206-7145

Student Contact:
#1 University Plaza
Office of Financial Assistance MS UHB 1015
Springfield, IL 62703–5407
(217) 206–6724  Fax (217) 206–7376
http://www.uis.edu/financialaid/

University of Illinois at Urbana-Champaign

Staff Employee Contact:
Personnel Services Office
52 East Gregory, MC-562
Champaign, IL 61820
(217) 333-2142  Fax: (217) 244-7304

Student Contact:
Office of Student Financial Aid
620 East John Street, MC-303
Champaign, IL 61820
(217) 333-0100  Fax (217) 265-5516
http://www.osfa.illinois.edu

Faculty and AP Employee Contact:
Academic Human Resources
807 S. Wright Street - Suite 420, MC-310
Champaign, IL 61820
(217) 333-8836  Fax: (217) 333–4019

To upload documents go to https://osfa.illinois.edu/DocumentUpload.