

## **Graduate and Professional Student Financial Services**

TUITION 2018-2019

## APU School of Education/ MOU Agreement Discount

Please complete all fields on this form. Report "N/A" for not applicable fields. Incomplete forms will be returned and will cause a delay in processing your financial aid application.

APU ID#:		Ac	ademic Progra	m:		-
Student Name:		First			— <u>———</u>	
APU will offer a 10% tuition dis Education and who enroll in an Sciences. In order to apply the	y APU School o	of Education program	or the Physical I	Education progran	n in the School of Beha	vioral and Applied
<ul> <li>in the student's finan</li> <li>This tuition discount employee may choos</li> <li>Discount will be applied</li> <li>Please attach employ</li> </ul>	cial aid packag may not be co e to forgo this ed to the stud ment verificat d. Proof will be	e. mbined with any othe tuition discount to re lent account after the cion (e.g. employee ba e required at initial enr	er institutional a eceive a School o add/drop date e dge, letter from	d available to Sch f Education schola each term. HR, etc.). Your dis	ool of Education stude arship instead.	ed to your account until
and your school distr	ict expires.			·	Memorandum of Undo	erstanding) between APU listrict.
List the number of units you plan to take:	Fall 2018	#	Spring 2019	#	Summer 2019	#
School District name			Date Em	ployment Began		
By signing this form, I affirm that a provide documentation to support t reduction, withdrawal, and/or repayn	he information I	have provided on this fo	orm. I understand	that any false state	ments or misrepresentation	on may be cause for denial,
Student Signature (Required- d	igital signatuı	re not accepted)		Date		
AZUSA PACIFI	C UNIVERSITY •	GRADUATE AND PROFE	AILING ADDRESS SSIONAL CENTER: .5-4570 • Fax (62		O • AZUSA, CA • 91702	-7000

Administrative Action:Pec	opleSoft Note Entered Date/	
MOU Current: Yes No	MOU Expiration Date:	032818