



PUBLIC HIGHER EDUCATION FEE DISCOUNT

FOR CHILDREN OF LICENSED PUBLIC SCHOOL TEACHERS
AND CHILDREN OF STATE EMPLOYEES

Higher Education Institution: _____

Term: ☐ Fall ☐ Spring ☐ Summer ☐ Other: _____ Year: _____

STUDENT INFORMATION

Full Name of Student: _____ Student ID No.: _____

Date of Birth: _____

Address: _____ City, State, Zip Code: _____

Student's Relationship to Teacher or State Employee:

- ☐ Natural or Legally Adopted Child
☐ Stepchild Living with Teacher or State Employee in a Parent/Child Relationship
☐ Other Individual Living in a Parent/Child Relationship with the Teacher or State Employee

Explain: _____

TEACHER/EMPLOYEE INFORMATION

Employment Status (check one):

(If currently employed, must be employed full-time.)

- Retired Public School Teacher ☐ Licensed Public School Teacher ☐ Public High School Technology Coordinator
Deceased Public School Teacher ☐ State Employee ☐ Retired State Employee ☐ Deceased State Employee

Full Name: _____ Phone No.: _____

Edison ID (State) or Employee ID No.: _____

Address: _____ City, State, Zip Code: _____

Employer: _____ Phone No.: _____

Retired Teachers/Employees: Eligibility must be verified by the TN Consolidated Retirement System (TCRS).

Email: TCRS.Financial@tn.gov Fax: 615-401-6818 Mail: TCRS, 502 Deaderick Street, Nashville, TN 37243 Voice: 800-922-7772 TDD: 800-766-4952

TEACHERS ONLY If applying as a public school teacher, you must be licensed by the Tennessee Department of Education pursuant to the [Educator Licensure Policy of the TN State Board of Education](#). Current License Number: _____

We individually do hereby certify, under penalties of perjury, that all of the information contained above is true, correct, and complete to the best of our knowledge, that v and that to the full extent of our knowledge a fee discount under these Rules. If following e responsible for payment of all waived fees pl

_____ Teacher/Employee Signature	All field Direc
_____ Date	
_____ Student Signature	
_____ Date	
	Employ
	Title



After eligibility is certified by Employer/TCRS,

FOR HIGHER EDUCATION INSTITUTION USE ONLY

Tuition Amount: \$ _____ Discount: \$ _____ Accepted by: _____ Date: _____