Retiree Application for Dependent Grant-in-Aid
(Retiree only use)

This form MUST be completed for each semester or summer session that your dependent is enrolled in classes based on the Submission Schedule.

Tuition Discount for: □ Penn State □ Pennsylvania College of Technology
Relationship to Retiree: □ Spouse □ Child

Retiree Information:

PRINT Retiree Name _______________________________ PSU ID # _______________________________

Dependent Information:

PRINT Dependent Name _______________________________ PSU ID or Penn Tech ID _______________________________

Student’s Campus Location (if applicable) / / Date of Birth / / Semester, Session, and Year of Aid Application

The official policy HR37, Grant-in-Aid for Dependents of Members of the University Staff, can be reviewed at the following website: https://policy.psu.edu/policies/hr37.

The application form is to be completed and forwarded to Penn State Employee Benefits, The 331 Building, Suite 136, University Park, PA 16802, fax to (814) 863-6227; or scan and email to benefits@psu.edu based on the Application Submission Schedule below.

Grant-In-Aid approvals will not be applied retroactively to previous semesters. Students will be responsible for the full cost of tuition, in accordance with University Bursar policies, if the application procedure is not followed and/or the application deadlines are not met.

<table>
<thead>
<tr>
<th>Semester</th>
<th>First Day to Apply</th>
<th>Last Day to Apply</th>
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</thead>
<tbody>
<tr>
<td>Summer 2020</td>
<td>February 4, 2020</td>
<td>August 12, 2020</td>
</tr>
<tr>
<td>Fall 2020</td>
<td>March 25, 2020</td>
<td>August 30, 2020</td>
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</tbody>
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* The application for dependent grant-in-aid applies to biological children, step-children, legally adopted children, children for whom you have legal guardianship, and your spouse. If the above named dependent has not been previously verified for other benefit coverage, the grant-in-aid will be provisionally approved and you will be requested to complete the dependent verification process by providing documentation to satisfy dependent eligibility. Only dependents that have been verified are eligible to participate in Penn State benefit programs.

I hereby apply for dependent grant-in-aid for the above named dependent and agree to notify Penn State Employee Benefits if said dependent becomes ineligible under the terms of HR37, Grant-in-Aid for Dependents of Members of the University Staff.

_____________________________ / / Date Signed
Retiree Signature