

PROCEDURES FOR CUNY EMPLOYEE TUITION WAIVER

PLEASE READ BEFORE COMPLETING THE TUITION WAIVER FORM (OFSR 305):

As part the "Economic Growth and Tax Relief Reconciliation Act of 2001 (EGTRRA)," which was signed into law on June 7, 2001, Section 127 of the Internal Revenue Code was extended permanently for both graduate and undergraduate courses, effective January 1, 2002. This benefit enables employers to assist workers to further their education at a cost of up to \$5,250 per year tax free, whether or not the course is job -related.

NOTE: CUNY eligible employees are hereby advised that undergraduate and graduate level courses in which they enroll in using the CUNY Employee Tuition Fee Waiver Form OFSR 305, may be reportable as wages and subject to withholdings if educational assistance benefits exceed the \$5,250 threshold, are non-job-related and do not meet the requirements of the working condition fringe benefit" exclusion. To meet the requirements of "working condition fringe benefit" exclusion the course must: 1) maintain or improve skills that an employee is required to have for employment; and 2) be expressly required by the employer, or is legally required in order to retain an established employment relationship, status or rate of compensation. Moreover, the course must: 1) not be for the purpose of satisfying the minimum educational requirements to qualify for employment; and/or 2) not to qualify the employee for a promotion or transfer to a new trade or business.

PROCEDURES:

EMPLOYEE:

Employee obtains the CUNY Employee Tuition Waiver Form OFSR 305 packet. Complete, sign and date Management Certification **page 2**, and CUNY Employee Classification Certification **page 3**. Submit OFSR 305 packet to supervisor for approval. (Email to supervisor. Response from supervisor or management representative will suffice only if signature cannot be applied to form. Specify approval of information stated within form.)

NOTE* Completed form must be submitted to the bursar at college of enrollment prior to the start of the semester.

EMPLOYEE SUPERVISOR/MANAGEMENT REPRESENTATIVE:

Complete 'Supervisor/Management Representative' section, sign and date. (Page 2)

Email OFSR 305 packet to College of Employment HR Office, and CC Employee. (Reference designated HR Tuition Waiver designee signers.)

COLLEGE OF EMPLOYMENT HUMAN RESOURCE OFFICE:

Sign and date attestation of Management Certification and CUNY Employee Classification Certification, **Box A (Page 3)**. Email OFSR 305 packet to Campus of Enrollment Registrar. Request to include cc to employee on all phases of waiver.

COLLEGE OF ENROLLMENT REGISTRAR:

Complete **Box B** (Page 4). Email OFSR 305 packet to College of Enrollment Bursar CC to employee and all prior parties.

COLLEGE OF ENROLLMENT BURSAR:

Complete **Box C** (Page 4). Email OFSR 305 packet to College of Employment HR signer with CC to employee and all prior parties.

COLLEGE OF EMPLOYMENT HUMAN RESOURCE OFFICE:

Complete Box D (Page 4). Forward via email to College of Employment Payroll office to record. CC employee and supervisor.

COLLEGE OF EMPLOYMENT PAYROLL:

Complete **Box E (Page 4)**. Email completed application to employee.

If the educational benefit exceeds the \$5,250 threshold and the course is determined to be non-job related and does not meet the working condition fringe benefits exclusion within the Internal Revenue and University Accounting Office guidelines, the HR Director of the College of Employment will so advise the Payroll Office so that the actual dollar amount of the tuition fee that has been waived will then be reported as wages and be subject to tax withholding. The determination will be recorded on the reverse side of this form.

If you add or delete a course you must submit the appropriate documentation to the HR Office at your College of Employment. The HR Director will notify the Enrollment Bursar to adjust employee's student account statement in CUNYfirst Student Financial.

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MANAGEMENT CERTIFICATION

TO BE COMPLETED BY EMPLOYEE

Employee Name		Employee ID	
Payroll Title		Payroll Title Code	
College of Employment		College of Enrollment	
Graduate Course	Course Name:	Course Number:	
Undergraduate Course	Course Description:		
How is this course job relate			
Graduate Course	Course Name:	Course Number:	
Undergraduate Course			
How is this course job relate	ed?:		
Graduate Course	Course Name:	Course Number:	
Undergraduate Course	Course Description:		
How is this course job relate	ed?:		
	Course Names	Course Number	
Graduate Course	Course Name:		
Undergraduate Course	Course Description:		
How is this course job relate	ed?:		
	lattest to the accuracy o	f all the information given.	
Employee Work Email			
Employee Signature_		Date	
		(Date Format xx/xx/xxxx)
	TO BE COMPLETED BY SUPE	RVISOR or MANAGEMENT	
Are the courses listed job-re	lated?		·
If not job-related, how doe	es it meet the working condition ϵ	exclusion?	
•	-		
Signature		Date	(Date Format xx/xx/xxxx
Name		itle	_

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CUNY EMPLOYEE CLASSIFICATION CERTIFICATION

COLLEGE OF ENROLLMENT	SEMESTER
ARE NOT WAIVED.THIS WAIVER IS OF	COST OF TUITION. NON-INSTRUCTIONAL FEES AND STUDENT ACTIVITY FEES ILY VALID FOR THE SEMESTER INDICATED ABOVE, AT THE COLLEGE INDICATE 305 FOR SERVICE REQUIREMENTS, SUMMER APPLICABILITY, AND TS.
This is to certify that	In the title of
is currently employed at	title code #
with date of appointment	Format xx/xx/xxxx), and may be considered for a tuition waiver as follows:
FULL-TIME INSTRUCTIONAL TITLES: (Includes Classified Managerial Titles	Teaching & Non-Teaching) ^(1, 2)
Undergraduate Courses	Graduate Courses (6 credits maximum)
ADJUNCT TEACHING TITLES (2) (*Only	(1) course may be taken)
Undergraduate Course	Graduate Course
FULL-TIME CLASSIFIED TITLES (Civil S	ervice)
Gittleson (3):	
Undergraduate Courses	Graduate Courses (6 credits maximum)
White Collar (Other than Gittleson) (3	!:
Undergraduate Courses	Graduate Courses (3 credits maximum)
Blue Collar (Custodial, Stores, and Se	curity) ⁽⁴⁾ :
	Graduate Courses (3 credits maximum)
Skilled Trades (Section 220) (1):	
Undergraduate Courses only	
New York to university and college administ disclosure is to ensure that my time and lear signature also signifies my understanding th reportable as wages and subject to withhold	sure of my class registration and attendance records at any unit of The City University of rators responsible for my employment and work performance. The purpose of this re records accurately reflect those authorized classes attended during working hours. My at under Internal Revenue Code Sec 127, the tuition assistance that I receive shall be ing if the benefit exceeds the \$5,250 threshold, and is for non-job-related undergraduate the working condition fringe benefit exclusion.
Employee Signature	DateEmployee ID
Employee Address	SS# (<u>Last 4 only</u>):
My signature below attests to the acc the Management Representative.	uracy of the job classification reported by the employee, and approved by
A. COLLEGE OF EMPLOYMENT H	R OFFICE
	ture Date
	(Date Format xx/xx/xxxx)
College HR Director/Designee Nam	e
Designee Title	

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EMPLOYEE CATEGORY	SERVICE REQUIREMENTS	CREDIT LIMITATIONS	SUMMER SESSION
Instructional Staff	1 Year for Undergraduate/Immediate	Undergraduate: No	No
	for Graduate	Limit/Graduate: 6 Credits	
Classified Managerial	1 Year for Undergraduate/Immediate	Undergraduate: No	No
	for Graduate	Limit/Graduate: 6 Credits	
Adjunct Teaching Titles	10 Consecutive Semesters	1 Course: Undergraduate or	No
		Graduate	
Gittleson Titles	6 Months	Undergraduate: No	Yes (UG Only)
		Limit/Graduate: 6 Credits	
Classified White Collar	1 Year	Undergraduate: No	Yes (UG Only)
		Limit/Graduate: 3 Credits	
Classified Blue Collar	1 Year	Undergraduate: No	Yes (UG Only)
		Limit/Graduate: 3 Credits	
Skilled Trades	1 Year	Undergraduate Only : No Limit	Yes
B. COLLEGE OF ENROLLN	MENT: CERTIFICATION OF ENROLLMENT (F	REGISTRAR)	
COLLEGE:	Re	egistrar Signature	
Course Name:	Course Number:		
	ourse Name: Course Number:		

C. COLLEGE OF ENROLLMENT: TUITION WAI	VER BALANCES (BURSAR)	
COLLEGE:	Tuition Amt Waived	Semester
Bursar Name:	Signature:	Date

Course Number: _____

Course Number: _____

D. COLLEGE OF EMPLOYMENT: HUMAN RESOURCE	OFFICE (Payroll Action)	Taxable	Not Taxable
COLLEGE:			
Reviewed by (Designee Name):	Date		(Date Format
NO PAYROLL ACTION NECESSARY	FORWARDED TO PAYROLL OFF	ICE FOR ACTION	xx/xx/xxxx)
HR Signature		Date sent to Pay	roll

TIT SIGNATURE		,
E. COLLEGE OF EMPLOYMENT: PAYRO	OLL OFFICE	
Payroll Officer/Designee Signature Na	me	
Signature	Date	(Date Text xx/xx/xxxx)

References

- 1. Board of Trustees Resolution, Cal. No. 7, January 28, 1980
- 2. CUNY-PSC Agreement, Article 29
- 3. CUNY Non-Instructional Clerical, Administrative, and Professional Employees Agreement, Article V
- 4. CUNY Custodial, Stores-stock, and Security Employees Agreement, Article V

Course Name:

Course Name:

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