



INTERVARSITY REBATE

Name _____ ID# _____ # of Credit Hours _____

This rebate should be applied to _____ semester of 20_____.

- Employment verification must be submitted with this form.
- This rebate cannot be combined with any other scholarships, grants, rebates, and/or tuition waivers from Trinity.
- This benefit/rebate will not be applied retroactively. It will be granted only in the semester during which a student is enrolled in classes.
- This rebate is not applicable toward students enrolled in the REACH and Extension Site programs.

I am a full or part time (minimum of 20 hours/week) staff member of InterVarsity and I am eligible for a discounted tuition rate on master's level courses of 50% off tuition. I understand that my employment at InterVarsity must be verified in writing each semester.

Student Signature

Date

For Office Use Only

RBIV\$ _____ Date _____ Approval _____