

# 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	Payroll Title Code	
College of Employment		College of Enrollment		
Graduate Course	Course Name:	Course Number:		
Undergraduate Course				
How is this course job relate				
Graduate Course	Course Name:	Course Number:		
Undergraduate Course	Course Descriptions			
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 Name	Course Number		
Graduate Course	Course Name:			
Undergraduate Course	Course Description:			
How is this course job relate	ed?:			
	lattest to the accuracy of a	Ill the information given.		
Employee Work Email	·	<u>-</u>		
Employee Signature_		Date		
		(Date Format xx/xx/xxxx	)	
	TO BE COMPLETED BY SUPERV	/ISOR or MANAGEMENT		
Are the courses listed job-re	lated?			
If not job-related, how doe	es it meet the working condition ex	clusion?		
Signature		Date	(Date Format xx/xx/xxxx	
Name	Titl	e	_	

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# **CUNY EMPLOYEE CLASSIFICATION CERTIFICATION**

COLLEGE OF ENROLLMENT	SEMESTER
ARE NOT WAIVED.THIS WAIVER IS ONL	OST OF TUITION. NON-INSTRUCTIONAL FEES AND STUDENT ACTIVITY FEES LY VALID FOR THE SEMESTER INDICATED ABOVE, AT THE COLLEGE INDICATE BOS FOR SERVICE REQUIREMENTS, SUMMER APPLICABILITY, AND S.
This is to certify that	In the title of
is currently employed at	title code #
with date of appointment	mat xx/xx/xxxx), and may be considered for a tuition waiver as follows:
FULL-TIME INSTRUCTIONAL TITLES: (Te (Includes Classified Managerial Titles)	
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 See	rvice)
<b>Undergraduate Courses</b>	Graduate Courses (6 credits maximum)
White Collar (Other than Gittleson) (3):	
Undergraduate Courses	Graduate Courses (3 credits maximum)
Blue Collar (Custodial, Stores, and Secu	urity) <sup>(4)</sup> :
<b>Undergraduate Courses</b>	Graduate Courses (3 credits maximum)
Skilled Trades (Section 220) <sup>(1)</sup> : Undergraduate Courses only	
New York to university and college administrar disclosure is to ensure that my time and leave signature also signifies my understanding that	ure of my class registration and attendance records at any unit of The City University of tors responsible for my employment and work performance. The purpose of this records accurately reflect those authorized classes attended during working hours. My under Internal Revenue Code Sec 127, the tuition assistance that I receive shall be use if the benefit exceeds the \$5,250 threshold, and is for non-job-related undergraduate working condition fringe benefit exclusion.
Employee Signature	DateEmployee ID
Employee Address	SS# ( <u>Last 4 only</u> ):
My signature below attests to the accur the Management Representative.	racy of the job classification reported by the employee, and approved by
A. COLLEGE OF EMPLOYMENT HR	OFFICE
College HR Director/Designee Signati	ure Date
College HR Director/Designee Name	(Date Format xx/xx/xxxx)
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 ENROLLI	MENT: CERTIFICATION OF ENROLLMENT (	REGISTRAR)	
COLLEGE:	R	egistrar Signature	
Course Name:		Course Number:	
Course Name:		Course Number:	
Course Name:		Course Number:	
Course Name:		Course Number:	

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

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

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E. COLLEGE OF EMPLOYMENT: PAYROLL OFFICE		
Payroll Officer/Designee Signature Name		
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

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