

THE UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER DISABLED and ELDERLY PERSONS – AUDITING OR ENROLLMENT

In accordance with the provisions of Tennessee Code Annotated, Section 49-7-113,

Subsection (a) – **audit** classes for persons with permanent total disability, retired from state service with 30 or more years (regardless of age) and persons who will be 60 years of age or older before or during the semester of application.

you are being provisionally accepted to **audit** a course without paying tuition charges, maintenance fees, student activity fees or registration fees. This acceptance is provisional, subject to the availability of class space and also to the enrollment of a specified minimum number of fee-paying students. Acceptance becomes definite only if there is space remaining in the class (for auditors) at the close of the last day for adding courses, after all fee-paying students have been enrolled, and if a sufficient number of fee paying students have enrolled. If you wish to audit a class and be assured of a space on the class rolls, you may pay the regular fees and attend the class as any other fee-paying auditor. You may not change your status from "fee-paying" to "disabled/retired/elderly person" classification (where no fees are involved) at some later date and expect to be refunded your fees.

Subsection (b) – academic **credit** classes for person with permanent total disability and persons who will be 65 years of age or older before or during the semester of application.

you may be enrolled in a course for academic **credit** without paying tuition charges, maintenance fees, student activity fees or registration fees to The University of Tennessee Health Science Center. You must make application for admission to the University, register for course(s), meet the requirements of a class for specified grades(s), and have a permanent academic record maintained in the same manner as other students enrolled for credit.

An application fee may be required. A record keeping fee of seven dollars (\$7) per semester hour/credit up to a maximum of seventy dollars (\$70), per semester, is required for those under the credit option.

Other requirements - Textbooks and other class materials must be purchased by the student. You must pay for any application fees, late drop fees, parking permit/fines, and any other fees that aren't specifically prohibited in TCA 49-7-113.

Special Notes:

- 1. Students auditing classes must satisfy the requirements outlined by the instructor when permission to audit is granted. They may take part in laboratory or field work with the permission.
- 2. Students accepted into classes for credit may participate on the same basis as fee-paying students.

To ensure your Permanent Total Disability, Retired or Elderly Persons tuition reduction request is processed before the fee payment deadline each semester:

- 1. Inform the Office of Disability Services (ODS) *or* the Bursar's Office each semester of your intent to attend classes.
- 2. Provide ODS *or* the Bursar's Office with current documentation before the beginning of each fall semester to verify current eligibility for this program as described in TCA 49-7-113.

PERMANENT TOTAL DISABILITY, RETIRED OR ELDERLY PERSONS TUITION REDUCTION APPLICATION

| Name: | | | | | |
|---|----------------------------|---|---------------|---------------------------|--|
| First | Middle | Last | | | |
| Address: | | | | | |
| Street | | City | State | Zip Code | |
| Phone: | Semeste | r Requested: | | | |
| Driver's License # | E | Expiration | | Age/DOB | |
| Are you receiving federal (*If you answered yes to vocation | | | | | |
| Complete ONE of the follow | ving processes: | | | | |
| For Permanent Total D | | | | | |
| 1. You must register wi | th the Office of Di | sability Services b | y going to | | |
| https://uthsc.edu/stud | entsuccess/acaden | nic-success/disabilit | y-services.ph | p and completing the | |
| online request form. | | | | | |
| 2. To verify Permanent | Total Disability | submit one of the f | allowing to C | nDC | |
| • | • | the Social Security | _ | | |
| | | showing deposited | | · | |
| | | ring Permanent Tot | | ociai security, or | |
| | • | • | • | owy. | |
| 3. Complete this form and submit to: The Office of Disability Services 910 Madison Ave., Ste. 105 | | | | | |
| | | | * | 15 | |
| For Retired State Empl | ovoo on og on Eld | Memphis, Ti | N 30103 | | |
| _ | - | erry r erson | | | |
| 1. You do not need to re | _ | Bursar's Off | iaa | | |
| 2. Complete the form as | ia subiiii to: | 910 Madison Ave., Ste. WP012 Memphis, TN 38163 | | | |
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| I have read these requireme | nts, understand the | m, and agree to abi | de by them. | | |
| Check the box to identify yo | our enrollment inte | ntions | | | |
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| Audit Stud | | | | Credit Student | |
| Totally Disabled Au | | | | isabled for Credit Stude | |
| 60-years or older Au | | | 65-years | or older for Credit Stude | |
| 30-years or more Sta | te service Auditor | | | | |
| Student Signature | Date | Stude | nt UT HSC II |) | |
| | | State. | 01 1100 H | _ | |
| ODS/Bursar Staff Signature | | | | | |
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