

**Southeast Arkansas College
Public Safety Employee
Three Hour Tuition Exemption Request**

Completed form may be faxed to 870-850-3062 or emailed to AdvisementCenter@seark.edu

Semester Exemption Requested: (Circle One ONLY)

Fall	Spring	Summer	20

Student Name: _____ SEARK ID # _____

Student Email: _____ Telephone # _____

Agency where Employed: _____ ID/Badge # _____

Agency Job Title: _____

Public Safety Tuition Exemption Policy:

Upon admission to SEARK College, all full-time municipal and county public safety officers and firefighters within our six county service area may qualify for a tuition exemption of up to **ONE three (3) hour academic course (or three hours tuition amount towards a course with more hours)** at Southeast Arkansas College. SEARK Service area includes the following counties: Jefferson, Cleveland, Desha, Drew, Grant and Lincoln.

Public Safety officers and firefighters include: city fire department, city police department, county sheriff's office, and SEARK security. It does not include officers of correctional institutions or other educational institutions police department employees or security officers.

Tuition exemption is based on the in-state tuition rate per credit hour. Required books and fees are not exemptible.

The last day to apply for admission is the last day to apply for tuition exemption.

A completed Request for Tuition Exemption form and up-to-date transcript must be submitted to the Student Advocate's Office, Student Services Building, Room 157, prior to registration each semester. The Tuition Exemption Request form requires the Administrative Head of the Public Safety Agency's Signature to confirm full-time employment with the agency. Students receiving the Public Safety tuition exemption must maintain a 2.0 GPA to keep the tuition exemption. Students may appeal the individual loss of exemption (in person) to the Vice President of Student Services who may refer the appeal to committee.

Student Signature: _____ Date: _____

Attach an up-to-date transcript to this completed form and forward to SEARK Student Advocate's Office, Student Services Building, Room 157. (Use WebAdvisor to print an unofficial transcript.)

Public Safety Agency Administrator's Signature:

Note: Signature below verifies FULL TIME employment with public safety agency listed above.

Public Safety Administrator Signature: _____

Printed Public Safety Administrator Name : _____

Date: _____ Email: _____ Phone: _____

Note: Tuition Exemption Requests are awarded subject to available funding and resources.