

TUITION GRANT SAMPLE WAIVER LETTER

**This letter must come from the Human Resources Dept. for the previous employer.**

LETTERHEAD (Former Employer)

Date

Johns Hopkins University  
Office of Benefits Services  
1101 E. 33<sup>rd</sup> Street, Ste. D100  
Baltimore, MD 21218

Re: Tuition Grant Waiver Letter for "former employee's name"

Dear Sir/Madam:

Please be informed that employee's name was employed with name of institution from hire date until termination date. On termination date, employee's name was eligible to participate in name of institution's education benefit for dependent children. **(REQUIRED LANGUAGE- letter will not be accepted without this sentence).**

**(Provide eligibility requirement for previous employer's plan – e.g., this is Johns Hopkins University's eligibility requirement.)**

Dependent children of Johns Hopkins University faculty, staff and Bargaining Unit members with two years of consecutive full-time employment and continuing in a full-time position are eligible to participate in this plan through the end of the calendar year in which they turn 23. The Plan covers only accredited, degree-granting institutions and pays 50% of the student's tuition and eligible fees, up to one-half of Johns Hopkins University's freshman undergraduate tuition for each eligible employee.

**(Provide contact information for previous employer's representative.)**

Sincerely,

(Previous Employer's Representative)