

Fairfield University
Tuition Discount Form



Students employed within a CT non-profit organization or agency must complete this form at the time of course registration at the beginning of their first term.

Continued employment and discount eligibility will be assessed by the dean's office at the beginning of each subsequent term of enrollment.

The completed form should be emailed to: gradadmis@fairfield.edu.

To be completed by student/employee:

First Name _____

Last Name _____

Fairfield ID _____

Program _____

Start Term Spring / Summer / Fall

To be completed by HR representative:

Employer/Company Name _____

Employee Start Date _____

HR Contact Full Name _____

HR Phone & Email _____

I certify that the above individual is currently employed at _____

HR Signature

Date

Fairfield University
1073 North Benson Road
Fairfield, CT 06824-5195