



**DEPENDENT AUTHORIZATION FOR
FLORIDA SOUTHWESTERN STATE COLLEGE
TUITION SCHOLARSHIP**

Employee must complete for spouse or dependent child. Florida SouthWestern State College requires proof of dependency by providing a copy of the employee's MOST RECENT Internal Revenue Tax Return. **A copy of class registration and tax return must be attached.**

THIS REQUEST MUST BE SUBMITTED TO THE OFFICE OF HUMAN RESOURCES FOR APPROVAL

Employee's Name (PLEASE PRINT) @ _____
Employee's Banner # _____
Date

Employee's E-mail Address

Dependent's Name (print) @ _____
Dependent's Banner # _____
Relationship to Employee

Employee is: Full-time Regular Employee Part-time Regular Employee

School Year 20 ____ / ____ Fall Spring Summer

Employee Signature _____
Date

OFFICIAL USE ONLY

FB-036 (Rev. 04/09)

Employee's Current DOH: _____		<input type="checkbox"/> Tax Form Received	<input type="checkbox"/> Course Schedule Received
Requested: _____	Approved: _____	Remaining for Academic Year: _____	
<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer	in the 20 ____ / ____ academic year. <input type="checkbox"/> Entered in Log
Total: \$ _____			
_____ Finance Representative Signature		_____ Date	