

# BENNINGTON COLLEGE

## EMPLOYEE COURSE REGISTRATION FORM

Employee Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Registrant: Employee  Spouse/Partner  Dependent

Registrant's Name (if not employee): \_\_\_\_\_

**Eligibility:** After having been continuously employed at the College for one year as a full-time employee (or in accord with the current schedule published by Human Resources for certain part-time benefits eligible employees), with employment continuing, an employee or his/her/their spouse/partner is permitted to take one undergraduate course per term, tuition-free, at Bennington College if there is room in the course. The registrant must obtain permission from their supervisor and must obtain prior approval from the Registrar and Human Resources. An employee may take certain courses (one undergraduate course per term), tuition-free at other institutions with whom Bennington College has reciprocal tuition agreements; additional approvals and course restrictions/limitations may apply to enroll at other institutions. Please contact the Registrar for additional details. It is expected that an employee's course attendance will not unduly affect the office's work schedule. Employees must make up any time taken for class attendance.

Children of full-time employees who have been employed at the College for two years or more may take up to two individual undergraduate courses per term at the College, tuition free, provided that the registrant obtains permission from the Registrar and Human Resources, that there is room in the course, and that permission has also been obtained from the instructor.

Details regarding the tax implication of these benefits may be obtained from Human Resources.

**Course Registration for non-matriculated students. *Matriculated students should register through the Dean's Office. Please note that the accumulation of individual courses cannot be combined to lead to a degree for a non-matriculated student.***

Institution where course will be taken: Bennington College  CVV

Term (check one): Fall  Spring  Summer  Year: \_\_\_\_\_

Course Title/Number \_\_\_\_\_ Instructor \_\_\_\_\_ Credits \_\_\_\_\_

### Approval

Human Resources \_\_\_\_\_

Supervisor \_\_\_\_\_

Registrar \_\_\_\_\_

Instructor \_\_\_\_\_

**IMPORTANT NOTE TO THE REGISTRANT:** Once fully approved, please forward the original form to the Registrar and a copy to [Human Resources](#). Please retain a copy of this form for your own records.