Affidavit of Dependency for Tuition Remission

I, _____, swear that, _____,
Print Employee Name Print Dependent Name

is my spouse or child (by birth, marriage or adoption) for tax purposes for calendar year _____ and is listed as such on my federal tax return for the calendar year tuition remission benefits were received.

Employee Signature:_____

Sworn to and subscribed before me on _____.

Notary Signature:_____

Seal: