



# SACHEM Tuition Waiver Program

(the Southeastern Association for Cooperation in Higher Education in Massachusetts)

## Certificate of Eligibility

**Employee Name** (*Print*): \_\_\_\_\_

**Date of hire:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_      **Department:** \_\_\_\_\_

**Position:**             staff             B&G/Union             administrator     faculty

**Full-time employee:**             calendar year             academic year

**Host Institution** (*school where up to two classes per semester will be taken*):

- Bridgewater State             Bristol Community College             Cape Cod Community College  
 Dean Junior College             Wheaton College             UMASS/Dartmouth  
 Massasoit Community College             Massachusetts Maritime Academy

**Semester/Term:** \_\_\_\_\_

**Courses to be taken:**

\_\_\_\_\_ Graduate Course? \_\_YES \_\_NO

\_\_\_\_\_ Graduate Course? \_\_YES \_\_NO

As the employee/SACHEM applicant I agree to abide by the regulations affecting this program. I fully understand that the SACHEM program provides tuition remission only and that I will be fully responsible for all other related fees and expenses relating to enrollment at the host institution. I also understand that tuition remission benefits may be subject to taxation as an employee benefit at Stonehill College in accordance with the Federal IRS tax code.

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_\_  
**Date**

Approved certification of eligibility at Stonehill College by:

\_\_\_\_\_  
**Employment Services Representative**

Office number: (508) 565-1105

\_\_\_\_\_  
**Date**