Please submit this tuition discount form after registering for classes each term, while also paying your portion of tuition and fees to Tulane Accounts Receivable in a timely fashion. The discount applies only to SoPA students taking SoPA classes, as indicated on the Tulane official Schedule of Classes.

This form must be submitted each semester*. Forms are due no later than one week after the first day of class. Students are responsible for reviewing their Accounts Receivable statement to verify that the credit has been applied to their account.

Student ID Number: ____________________________ Date: ______________________________
Name: ____________________________________________________________________________
Address: __________________________________________________________________________
City: _________________________ State: ________ Zip: ____________________
Home Phone #: (____) _______________ Work Phone #: (____) ________________ Age: _____________
Discount for Term:  □ fall  □ spring  □ summer  Year: ____________________________
Discount for Degree:  □ undergraduate  □ graduate
Student’s Signature: ______________________________________ Tulane Email Address: ________________________________

□ Full-time pre-K through 12th grade teachers and paraprofessionals including classroom assistants and assistant teachers (attach a letter from your Principal verifying current position)

□ Age 60 and over (attach a copy of driver’s license or state ID)

□ Active-duty military personnel or veteran
   military documentation verified:  □ ID  □ orders  □ DD214  □ DD1172  by: ________________________________

□ Active and retired public safety personnel (firefighter, police officer, or paramedic) (attach a copy of active or retired ID card, recent pay stub, or letter of good standing)

□ COVID-19 Related Relief (attached a copy of the Verification of Reduced Employment Status or a copy of an Unemployment Insurance account statement from Louisiana or other state of residence)

□ NLCU partnership referral for the MPA program

□ Full-time Jefferson Parish employees (attach a copy of your employee ID and complete supervisor information below)

□ Full-time Orleans Parish employees (attach a copy of your employee ID and complete supervisor information below)

Supervisor’s name: ____________________________ Title: ____________________________
Department: _________________________________ Office telephone #: (____) ______________
Supervisor’s Signature: ____________________________ Date: _____/___/_______

Teachers, classroom assistants, and paraprofessionals must still submit a letter from their principal verifying employment.

* The COVID-19 Relief fund discount will apply for the fall 2020 and spring 2021 semesters. Students need not reapply in the spring semester as long as they have a qualifying GPA of 3.0 in the fall.

This form may be submitted to any School of Professional Advancement office or by email to sopaz@tulane.edu.