

FACHEX

Faculty and Staff Children's Exchange

Boston College Certification of Eligibility

To Be Completed by the Parent Employed by Boston College

Parent's Full Legal Name: _____

Eagle ID Number: __ __ __ __ - __ __ __ __

Title: _____

E-mail: _____ Phone Number: _____

I certify that the person named below is my child by birth, marriage, or legal adoption and that s/he does not have a bachelor's degree from any institution. I further certify that the date of birth below is correct. I attest that the information on this form is true, complete, and accurate. I understand that if any of this information is found not to be as I attest, I may be subject to penalties, including forfeiture of tuition remission and possible disciplinary action, up to and including termination of employment. I believe that I qualify for the Tuition Remission Benefit because I will have completed at least five years of continuous full-time service at Boston College by the beginning of the semester to which the Tuition Remission will apply. **I affirm that my son/daughter has registered on the Tuition Exchange/FACHEX website and listed the schools being applied to.** I am requesting that Certification of my eligibility for the benefit be registered on the site. I understand that any change in my employment status at Boston College could affect my eligibility for this benefit.

NOTE: FACHEX now uses the Tuition Exchange website service and that's where a student creates an account and completes the application for FACHEX consideration.

Child's Full Legal Name: _____

Date of Birth: _____

Entering Semester: Fall __ or Spring __ Year _____

Parent Signature: _____ **Date:** _____

RETURN THIS FORM TO THE BENEFITS OFFICE – 129 Lake Street

BENEFITS OFFICE CERTIFICATION:

Based on the parent's current status, the child named above __ will be __ will not be eligible for the Boston College Tuition Remission Benefit as of September 20__ __.

Benefits Office Signature

Date