

University of Redlands

Tuition Discount Change Request



STUDENT INFORMATION

Student Name: _____ Student ID: _____

Academic Program: _____ Start Term: _____

☐ School of Business

☐ School of Education

DISCOUNT INFORMATION

The University partners with organizations who support employee education and education benefits. Our list of partners grows annually, and ranges from banking and rocket science, to healthcare and government, to entertainment and law enforcement, to unified school districts and community colleges, and more. If you believe you should be receiving a partner discount, please complete and return this form to: enrollmentmgmt@redlands.edu.

Employer: _____

Spouse Employer: _____

Spouse Name: _____

Membership: _____

Attach the Director of Human Resources card here or provide proof of membership.

HUMAN RESOURCES

I certify that _____ is employed by _____.

HR Signature: _____ Date: _____

STUDENT RESPONSIBILITY

I understand that discounts are not retroactive and will be applied to the first billing cycle after this completed form is received and processed (Please allow three business days for processing). I also understand that it is my responsibility to notify the Office of Student Financial Services if my eligibility for this and/or other partner discounts changes at any time.

Student Signature: _____ Date: _____

OFFICE USE:

Discount Code:

Discount %: