



COLLEGE OF

# Education, Health & Aviation

Submit to: [EDUCATION.OUTREACH@OKSTATE.EDU](mailto:EDUCATION.OUTREACH@OKSTATE.EDU) (405) 744-6254 325U WILLARD, STILLWATER, OK 74078

## Oklahoma Teacher Online Degree Program Outreach Fee Waiver Request

Oklahoma State Department of Education certified teachers who are currently employed full-time by a school in Oklahoma **and** are enrolled in a **College of Education, Health and Aviation (EHA) [online degree or online graduate certificate program](#)** may receive a waiver of their **Education Online/Outreach fees**.

If the appropriate signatures are obtained and this form is received by the Education Outreach office **prior** to the beginning of the applicable term, this waiver will be applied once your certification and employment are verified. If this form is not on file prior to the beginning of the term, the fee waiver will not be granted. This form must be resubmitted every semester you seek the waiver.

This waiver **does not** apply to online courses being taken as part of traditional/face-to-face degree programs. Courses offered by other institutions or colleges are not covered. For full tuition and fee information, please visit <https://bursar.okstate.edu/tuition-and-fees>.

Are you an Oklahoma Certified Teacher? Yes  No

Are you employed full-time by a school in Oklahoma? Yes  No

School Site: \_\_\_\_\_ School District: \_\_\_\_\_

School Principal's Printed Name \_\_\_\_\_ Principal's Email: \_\_\_\_\_

I am enrolled in \_\_\_\_ EHA Online Course(s) for a total of \_\_\_\_ credit hours for the \_\_\_\_\_ (Fall/Spr/Smr) Semester of \_\_\_\_ (Yr.) and am requesting the Education Online/Outreach fee waiver.

Printed Full Name: \_\_\_\_\_ (include middle) Date of Birth: \_\_\_\_\_ (MM/DD/YYYY)

OSU Campus Wide ID (CWID): \_\_\_\_\_ Your Online Degree/Cert Program: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_