



# AMBS

Anabaptist Mennonite  
Biblical Seminary

# Tuition Waiver Application

## For Goshen College employees and spouses

**Please submit this form to the AMBS Financial Aid Office one week prior to the first day of class.**

Current full-time Goshen (Indiana) College employees and their spouses can take **up to six hours of graduate-level coursework** (credit or audit) **per academic year at AMBS with a 100-percent tuition discount**. Current part-time Goshen College employees (50–99 percent) and their spouses can receive a tuition discount for the same percentage that they are employed by GC. Employees working less than 50 percent are not eligible.

This benefit begins with the second year of employment. The GC employee is responsible to pay the Student Services Fee and any other fees above tuition. Note: Auditing a class is dependent on the professor’s permission.

This discount does not apply to courses in AMBS’s Doctor of Ministry in Leadership program or to courses taken for independent study.

After taking two courses, if the employee or spouse wishes to continue studying, they must apply for admission to AMBS.

Use the “Guest registration form” at [ambs.edu/tuition-waiver-applications](http://ambs.edu/tuition-waiver-applications) and submit this completed form to AMBS’s Financial Aid Office ([financialaid@ambs.edu](mailto:financialaid@ambs.edu)).

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

I am employed \_\_\_\_\_ percent at Goshen College. Employment beginning date \_\_\_\_\_

I am the spouse of \_\_\_\_\_, who is employed \_\_\_\_\_ percent at Goshen College.  
Employment beginning date \_\_\_\_\_

Employee is considered to be:  full time (100 percent)  part time (50–99 percent)

I plan to enroll for \_\_\_\_\_ hours for:  credit  audit

Year: 20\_\_\_\_–20\_\_\_\_ Term:  Semester One  Semester Two  Summer Term

\_\_\_\_\_  
Employee signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Goshen College Human Resources Officer

\_\_\_\_\_  
Title of Goshen College Human Resources Officer

\_\_\_\_\_  
Signature of Goshen College Human Resources Officer

\_\_\_\_\_  
Date

### For office use

Approved \_\_\_\_\_ (initials)

Amount \_\_\_\_\_ Date \_\_\_\_\_

AY qualified \_\_\_\_\_

Sem. One \_\_\_\_\_ Sem. Two \_\_\_\_\_ Summer Term \_\_\_\_\_

**Anabaptist Mennonite Biblical Seminary • Admissions and Financial Aid**

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