

**EMPLOYER
TUITION ASSISTANCE
VERIFICATION**

Southern Wesleyan University
PO Box 1020 | 215 Clayton Street
Central, SC 29630
Phone: 864-644-5500 | Fax: 864-644-5970

Student's Last Name, First Name, M.I.

SWU ID # **OR** Last 4 digits Social Security Number

Federal regulations require that all financial assistance be included in your financial aid package.

The employer assistance section of your Admissions Application was either left blank or was incomplete. Please advise of your employer policy (amount or % of assistance) as soon as possible to avoid any delay in aid.

Employer Name: _____

Does your employer provide any type of tuition assistance? **YES** **NO**

If so, what is the \$ amount or % of assistance they provide _____.

Is there an annual limit? **YES** **NO**

If so, what is the annual limit - \$ _____.

Student Signature: _____

Date: _____

Questions? Please contact your Financial Aid Counselor for assistance at:

CAMI MILLER

cmiller@swu.edu

Phone (Local): (864) 644-5519

Phone (Toll-free): (800) 282-8798 ext. 5519

Fax: (864) 644-5970