

*Union College offers students the opportunity to take additional undergraduate classes at half the current tuition rate (up to the current maximum full-time credit limit).*

## ELIGIBILITY

- Applicants must hold a baccalaureate degree from an accredited US college or university (or by special permission, holders of equivalent international degrees)
- Must be accepted at Union College
- An official transcript must be on file at Union College verifying the degree.
- Any previous account at Union College must be paid in full.
- Must maintain satisfactory academic progress each semester (2.0 minimum semester GPA) in order to continue in the Baccalaureate Bonus program.

## GUIDELINES

- Only fall/spring semester tuition is covered up to the current maximum full-time credit limit. Baccalaureate Bonus students will be responsible for full tuition for credits above that limit.
- Students paying full tuition will receive priority for enrollment in limited-enrollment classes and sections.
- Expenses **NOT** covered:
  - programs already discounted (summer school, EAP classes)
  - professional phases of the Nursing, Occupational Therapy Assistant, Physician Assistant, and International Rescue and Relief programs
  - Adventist Colleges Abroad
  - laboratory fees, off-campus courses (including those in affiliated programs)
  - ASB fees, food service charges, room rent, general fees and other miscellaneous charges
- Baccalaureate Bonus recipients are not generally eligible for federal grants, donor scholarships or discounts. Students may apply for federal student loans.

## STUDENT REQUEST

Student Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Have you ever attended Union College?  Yes  No If yes, student ID # \_\_\_\_\_

Graduate of \_\_\_\_\_ Year Graduated \_\_\_\_\_

Previous Major \_\_\_\_\_ Degree \_\_\_\_\_

Planned additional UC major \_\_\_\_\_ Degree \_\_\_\_\_

Planned UC graduation date for additional degree: Month \_\_\_\_\_ Year \_\_\_\_\_

***I request approval for Baccalaureate Bonus.***

Student signature \_\_\_\_\_ Date \_\_\_\_\_

## APPROVAL SIGNATURES

Records Office \_\_\_\_\_ Date \_\_\_\_\_

Student Financial Services \_\_\_\_\_ Date \_\_\_\_\_

*(Return completed and signed form to the Records Office)*