

**RHODE ISLAND COLLEGE
UNEMPLOYMENT TUITION WAIVER
FALL 2025**

Individuals receiving unemployment benefits from the State of Rhode Island may be eligible for a waiver of tuition for the courses taken at Rhode Island College. ***Students must have an active, open claim with the Rhode Island Department of Labor and Training.***

- **Waiver applicants must submit the following documentation:**
 - DLT Certification of UI Eligibility Form (DLT-467). The form must be dated as follows:
 - After June 26, 2025 and before August 25, 2025
 - RI Public Higher Education Unemployment MEANS Test
 - Signed copy of 2024 federal form 1040
 - Copy of all W2 Forms for the Unemployed
 - Copy of RI Driver's License or RI State ID
 - Payment of required fees not covered by the waiver
 - Completed 2025/2026 FAFSA
- **Waiver Registration Period Begins: FRIDAY, AUGUST 22, 2025**

Registration **PRIOR** to this date **WILL NOT BE ELIGIBLE** for the tuition waiver. Waiver approval is based on space availability. Waiver may not be used for specific courses that reserve places for students upon acceptance into a program. Certain classes are not eligible for the tuition waiver – student teaching, practicum, applied music, clinical nursing & independent study are some examples. Please contact the Bursar's Office if you have questions regarding course eligibility.
- **Deadline to Submit Documentation: TUESDAY, SEPTEMBER 2, 2025**

Tuition waiver requests will not be processed if forms are incomplete, documentation is missing, or if payment for required fees is not presented. Waivers cannot be used for non-credit courses, program fees, or audit fees. Waivers cannot be used for non-credit courses, program fees, or audit fees.

IMPORTANT NOTICE: Waiver recipients enrolled in a degree program (*matriculated students*) **are required** to apply for Financial Aid by filing the 2025 – 2026 Free Application for Federal Student Aid (FAFSA). Please apply online at www.fafsa.ed.gov. The FAFSA, and any verification documentation requested by the Financial Aid Office, at Rhode Island College, will be used to determine Financial Aid eligibility. Any scholarship or grant aid awarded will be applied toward your tuition in lieu of your waiver, and the amount of your waiver will be reduced accordingly. Waiver applications will be returned or denied if the FAFSA is not completed. If you are considered a dependent student for financial aid purposes, you are not eligible for an unemployment waiver.



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**RI PUBLIC HIGER EDUCATION
UNEMPLOYMENT MEANS TEST**

ATTACH SIGNED COPY OF FEDERAL INCOME TAX RETURN

Student Name: _____

Home Address: _____

RIC ID Number: _____ **Phone:** _____

**Completed waiver
applications and payment
can be sent to:**

Rhode Island College
Bursars Office, Bldg 4
600 Mount Pleasant Ave
Providence, RI 02908

OR:

Bursar@ric.edu

- 1) Did your parent (or someone else) claim you as a dependent for 2024?
_____ Yes (NOT ELIGIBLE) _____ No
- 2) Did you file a 2024 tax return? _____ Yes _____ No (Additional documentation required)
- 3) Total income from form 1040 line 9: _____
- 4) Total number of dependents: _____ (Form 1040, add 1 if single; add 2 if married filing jointly)
- 5) List 2024 wages from unemployed individual(s) line 1 of form W-2 (Please attach copies of all W-2s)

Company Name	Amount (USD)	W2 Attached	
_____	_____	_____ Yes	_____ NO (Add'l Doc Req)
_____	_____	_____ Yes	_____ NO (Add'l Doc Req)
_____	_____	_____ Yes	_____ NO (Add'l Doc Req)
_____	_____	_____ Yes	_____ NO (Add'l Doc Req)

(Line 5) **Total:** _____

- 6) Subtract total of item 5 from line 3 \$ _____
- 7) Using the table below, enter the dollar amount that corresponds to number of dependents claimed from line 4 above: _____

- | | |
|-------------|--------------|
| 1) \$46,950 | 5) \$112,950 |
| 2) \$63,450 | 6) \$129,450 |
| 3) \$79,950 | 7) \$145,950 |
| 4) \$96,450 | 8) \$162,450 |

For family units with more than eight members, add \$15,650 for each additional family member.

If the amount in Item 7 is more than the amount in Item 6, you qualify for the waiver.

I declare that the above information is true and correct to the best of my knowledge.

Signature: _____ **Date:** _____



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For Office Use Only:

Reviewed by _____ Date: _____

Applied for Financial Aid: _____ Yes _____ No

Matriculating Student: _____ Yes _____ No

Waiver Approval: _____ Yes _____ No