



Lee College District
Employee Dependent Scholarship Program

Dear Scholarship Applicant:

“Dependent” for employee dependent scholarship purposes shall be defined as follows per Board Policy DEB (LOCAL): “the natural born or adopted children of employees or employee’s spouse, for whom the employee claims a dependency exemption for federal income tax purposes” or the student is defined as dependent for Federal Financial Aid purposes.

The applicant must enroll in a college credit course and complete regular registration procedures. The applicant must also satisfy state nepotism rules as listed below.

Student’s
Name: _____ SSN: _____

Address: _____

Relationship to employee: _____ Child _____ Spouse (Please provide tax returns, marriage license or financial aid documents to support this relationship.)

Lee College Employee’s
Name: _____ SSN: _____

Please review a list of current Lee College Board of Regent members at www.lee.edu/regents/ and then select the most appropriate answer below indicating your relation to any of the Board of Regent members.

- _____ Not related to a Regent
- _____ Regent’s mother, father, daughter or son
- _____ Regent’s brother, sister, grandparent or grandchild
- _____ Regent’s great-grandchild, uncle (brother of parent), aunt (sister of parent), nephew (son of brother or sister), or niece (daughter of brother or sister)
- _____ Regent’s spouse; spouse’s child; spouse’s mother or father; child’s spouse; or parent’s spouse
- _____ Regent’s spouse’s brother or sister; spouse’s grandparent; spouse’s grandchild; brother or sister’s spouse; grandparent’s spouse; or grandchild’s spouse

Student Signature: _____ Date: _____

Employee Signature: _____ Date: _____

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Office Use:

Full Time Employment Verified: _____

Dependent Status Verified: _____

Waiver Applied Date: _____ FA Initials: _____