



TENNESSEE STUDENT ASSISTANCE CORPORATION

# REDUCTION IN FORCE (RIF) TUITION ASSISTANCE

PLEASE COMPLETE AND SUBMIT THE APPLICATION PRIOR TO THE END OF EACH TERM. **A COPY OF THE SEPARATION NOTICE MUST BE SUBMITTED WITH THE INITIAL APPLICATION.**

THIS PROGRAM IS AVAILABLE TO TENNESSEE STATE EMPLOYEES WHO WERE SEPARATED DUE TO A REDUCTION IN FORCE (RIF). APPLICANTS HAVE TWO YEARS TO ENROLL AT AN ELIGIBLE POSTSECONDARY INSTITUTION BEGINNING WITH THE DATE OF SEPARATION. TUITION ASSISTANCE BENEFITS WILL COVER THE COST OF TUITION AND MANDATORY FEES FOR TWO ACADEMIC YEARS.

### PERSONAL INFORMATION

NAME: \_\_\_\_\_ SSN4: xxx-xx-\_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY ST ZIP CODE

CELL PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

EMPLOYMENT DATES OF SERVICE - FROM: \_\_\_\_\_ TO: \_\_\_\_\_

### EDUCATION INFORMATION

EDUCATIONAL GOAL: \_\_\_\_\_ TUITION STATUS: \_\_\_\_\_

INSTITUTION: \_\_\_\_\_

ENROLLMENT STATUS: \_\_\_\_\_ NUMBER OF HOURS: \_\_\_\_\_

TERM START DATE: \_\_\_\_\_ TERM END DATE: \_\_\_\_\_

*I hereby certify that the information provided is true and accurate to the best of my knowledge.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Send the completed application via email to [TSAC.Aidinfo@tn.gov](mailto:TSAC.Aidinfo@tn.gov).**