MEMORANDUM

TO: Employers of Certified Teachers

FROM: South Dakota Board of Regents

SUBJECT: Reduced Tuition Program for Teachers

South Dakota Codified Law (§ 13-55-23 through § 13-55-28) establishes a reduced tuition program for K-12 teachers and vocational instructors; those who meet identified criteria will benefit from a 50% reduction in tuition for courses – both undergraduate and graduate – completed at South Dakota public universities. For state-support courses (typically those courses taught face-to-face on a main campus), approved participants will be assessed 50% of tuition plus 100% of required fees. For off-campus courses (commonly those courses that involve distance learning or face-to-face instruction at a learning center or off-campus location), approved participants will receive a reduction that is equal to 50% of state resident rate.

To apply for this reduced tuition program, interested teachers and instructors are required to complete form 250-97 (see attached), secure designated signatures, and submit to the appropriate university at the **point of registration for the current term**. Please note that individuals who register for courses during the regular academic year (fall and spring) must be currently employed with a teaching contract; those who register for courses during the summer must have a signed teaching contract for the succeeding school year. Further, participation is limited; it is contingent upon available space. Conferred eligibility is term-specific; consequently, the attendant form must be completed and submitted for each term of participation.

Submission of the form (250-97) is required under SDCL § 13-55-24; information will be used by the university to determine eligibility. We ask that you reproduce this two-page form and make it readily available to all teachers employed in your school district. If questions arise, please direct them to the South Dakota Board of Regents (605-773-3455). Thank you for your continued support of education in our state!

Updated: January 2021 FORM 250-97

STATE OF SOUTH DAKOTA

APPLICATION FOR REDUCED TUITION (SDCL §13-55-23 and §13-55-24 through §13-55-28)

The applicant must present this application and certification of eligibility form when he or she registers for university courses.

PLEASE TYPE OR PRINT IN INK.

Legal Name:				
	Last	First	Middle	
Home Address:				
	Street	City	State	Zip
Home Telephone:		Certificate Number:		
Student ID (returning	/continuing students):			
School District Name	& Number or Accredited	School:		_
	EMPLOYER CERTIFIC	ATION OF ELIGIBILITY		
To Be Completed By	District Superintenden	t Or Designee Or Accr	edited School	Principal
(name and number of s subsequent school yea administrative rules /	I (circle one) teacher by school district or name of ar for courses in the sur employment contract (contain a certificate to teach	accredited school) for the mmer term) and is required one) to attend co	he current scho uired by the s	ol year (or state law /
Signature of Superintend	ent or Employing Official	Name of Distric	t or Accredited Sc	hool
Signature of Superiment	ent of Employing Official	Name of Distric	of Accidition of	11001
Name and Title	e (print or type)		Date	
Tele	phone			

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APPLICANT CERTIFICATION OF ELIGIBILITY TO BE COMPLETED BY APPLICANT

NOTE: Use of the tuition reduction only applies to the Regental institutions. Those institutions are as follows:

Black Hills State University

South Dakota School of Mines & Technology

South Dakota State University

South Dakota State University

Dakota State University

Northern State University

South Dakota State University

University of South Dakota

I CERTIFY THAT I MEET ALL OF THE FOLLOWING REQUIREMENTS:

1.	I am a resident of the State of South Dakota.

- 2. I am a certified elementary (K-6) or secondary teacher (7-12) or vocational instructor and am presently employed in South Dakota as a teacher or vocational instructor.
- 3. I am required by state law, administrative rules or an employment contract to take college courses as a condition of employment or to maintain a certificate to teach.
- 4. I am not entitled, at this time, to other reduced tuition benefits by law.

☐ Fall

Name (print or type)

The courses which I intend to take during the term are:

- 5. I have maintained an academic grade point average of 3.0 or better for coursework completed through this program, or I have not completed previous coursework under this program.
- 6. I am not requesting reduced tuition for more than six (6) semester credit hours under this program in the current academic year. The academic year shall begin with the Fall semester and include all of the following summer as defined in BOR Policy 5:5(H)(3).
- 7. I understand that my enrollment under this Tuition Reduction Program is dependent upon space available; and that reduced tuition under this program may be taxable as income under federal Internal Revenue Service regulations.

The term for which I intend to apply for reduced tuition is (check one and enter year):

□ Spring □ Summer

University	Course Prefix, No. & Title	Eligible Credit Hours
TIFY AND ATTEST THAT ALL INF	FORMATION PROVIDED IN THIS APPLA	ICATION IS CORR
TATEMENTS 1-7 (ABOVE) ARE	FORMATION PROVIDED IN THIS APPLA ACCURATE. I UNDERSTAND THAT IN TATION MAY CONSTITUTE FRAUD.	

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