

**Kingman Regional Medical Center
 Tuition Reduction Program
 Employment Confirmation Form**

Employee Information

Last Name	First Name	Middle Initial		NAU ID Number
Street	City	State	Zip Code	Cell Phone Number
Enrollment Term (e.g. Fall, Spring or Summer/Year)				

Instructions:

1. Complete this form after you have been admitted to Northern Arizona University (NAU). This form must be submitted each semester in which you intend to enroll at NAU.
2. Print a copy of your employment verification using The Work Number.
3. To apply your tuition reduction to your NAU student account, send this form and the Work Number employment verification document to:

Email: EMEnrollment@nau.edu or
 Address: Northern Arizona University
 Attn: EMSA Enrollment
 15451 N. 28th Ave
 Phoenix, AZ 85053

4. These forms must be completed and processed by NAU prior to the tuition and fees payment deadline for the intended semester of enrollment (https://nau.edu/sdas/important_payment_dates/).
5. Submit this document to NAU no earlier than the dates listed below:
 - a. Fall Semester - July 1
 - b. Spring Semester - November 1
 - c. Summer Semester - April 1

By signing below, I certify, to the best of my knowledge, that the information in this document is true and accurate.

Employee Signature:	Date