WPI Graduate Level Course Job Related Designation Form

Refer to instructions on bottom b	efore completing the form. Please print all information.
Name:	ID #:
Department:	Campus Extension:
Title:	Department Head/Supervisor
Course No. Course Name	Academic Term Credit Hrs. Dept Head/Supervisor Approval
Based on the IRS regulations, your De	partment Head/Supervisor must review each course to determine if a course
	rmines a course is job related, he/she must sign to the right of each job urse is not job related, he/she should not sign next to the particular course.
course(s) taken is job related and she they are incurred to meet minimum the employee for new employment. The following guidelines must be folen 1. Any course that maintains of his/her job description is to 2. Any course that allows the supported by his/her job description description is to supported by his/her job description is to supported by his/her job description.	be considered job related. employee to meet minimum job requirement for his/her current job as scription is to be considered job related. determination, the form must be returned to the Office of Human
Statement of Understanding	
review by the Internal Revenue Se allowed a tax exemption on all job related the value of my tuition ren	el course(s) my Supervisor has designated as job related are subject to rvice. As an employee and under the current tax legislation, I am related courses. If the course(s) so designated is found not to be job hission amount will be considered taxable income for which I may owe for late fees, interest and civil fines.
Employee's Signature	Date

¹ Reg Sec. 1.162-5(b)