



NOVA SOUTHEASTERN UNIVERSITY
Fischler School of Education and Human Services
ALLIANCE DISCOUNT REQUEST FORM

**NSU-NAESP Advanced Degree Program Alliance Discount
And NAESP Membership Verification Request Form**

This discount applies *only* to new students wishing to pursue an NSU-NAESP advanced degree; current NSU students are *not* eligible to receive this discount. Applicants *must* submit proof of NAESP membership in order to receive this special member discount and must have been a NAESP member in good standing for six months. The NAESP membership must remain constant throughout the student's program of studies with NSU-FSEHS for the student to retain eligibility for the discount.

Date: _____ Entry Term: Winter Summer Fall 20 _____

NAME: (Last): _____ (First) _____ (M) _____

Student ID Number: _____

Date of Birth: _____ (mm/dd/year) Home Phone Number: _____

Home Address:

(Street) _____ (City) _____

(State) _____ (Zip) _____ EMAIL ADDRESS: _____

*NSU Email Address: _____

NAESP Membership Number: _____

Teachers, submit your principal's membership #:

NAESP Membership Effective Date: _____

I, _____, qualify for a 20 % discount per the

NAESP alliance with the Fischler School of Education and Human Services. I understand that

the discount is deducted from the current, standard tuition rate and that only one discount can

apply. I am enrolled in the _____

Program. If applicable, my anticipated date of Program completion is: _____

Students Signature: _____

Office Use Only
STVRATE: _____
Effective Term: _____
Entry Date: _____
Authorization: _____

*Please fax this form and the letter to 954-262-3724 Attention: Accounting, Budgeting, and <u>Financial Planning</u>
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