THE UNIVERSITY OF TENNESSEE

Physician’s Certificate of Total Disability

I, ____________________________, M.D., am a physician practicing in the medical specialty of ____________________________. I have examined ____________________________ and do hereby certify that he/she suffers from the below-described “permanent total disability which totally incapacitates such person from working at an occupation which brings him an income “as defined in T.C. A. Section 49-3251 (below):

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

Date

Physician

Address:

__________________________________________________________________________________________

__________________________________________________________________________________________

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Tennessee Code Annotated, Section 49-3251

Subsection (a)

Auditing of Courses
Disabled persons and elderly persons auditing courses at state colleges or universities. (l) Disabled persons suffering from a permanent total disability which totally incapacitates such person from working at an occupation which brings him an income, and person sixty (60) years of age or older, who are domiciled in Tennessee, may audit courses at any state-supported college or university without paying tuition charges, maintenance fees, student activity fees or registration fees; however, this privilege may be limited or denied by the college or university on an individual classroom basis according to space availability. Provided further, that the provisions of this section shall not apply at medical schools, dental or pharmacy schools and no institution of higher education shall be required to make physical alterations of its buildings or other facilities to comply with this section. Prior to admittance, the university or college involved may require an affidavit or certificate from a physician or an agency charged with compensating the disabled person or adjudicating the permanent total disability of the person who is requesting admittance to classes, that such person is permanently totally disabled as set forth herein.

Subsection (b)

Taking courses for Credit
(b) Subject to the same terms and conditions as provided in subsection (a), disabled and persons sixty-five (65) years of age or older, who are domiciled in Tennessee as defined in subsection (a) may be enrolled in courses for credit at state supported colleges and universities without payment of tuition charges, maintenance fees, student activity fees or registration fees, except that the Board of Trustees of the University of Tennessee and the Board of Regents of the State University and Community College System may provide for a service fee which may be charged by the institutions under their respective jurisdictions, the fee to be for the purpose of helping to defray the cost of keeping the records of such students and not to exceed fifty dollars ($50) a quarter or seventy dollars ($70) a semester.

06/26/15
THE UNIVERSITY OF TENNESSEE AT MARTIN
SPECIAL POLICY FOR TOTALLY DISABLED AND/OR SENIOR CITIZEN
AUDITORS/CREDIT STUDENTS

In accordance with the provisions of Tennessee Code Annotated, Section 49-3251, subsection (a), you are being provisionally accepted to audit a course or receive credit for a course at The University of Tennessee at Martin without paying regular fees. This acceptance is provisional, subject to the availability of class space and also to the enrollment of a specified minimum number of fee-paying students. Acceptance becomes definite only if there is space remaining in the class (for auditors) at the close of the last day for adding courses, ________________ after all fee-paying students has been accommodated, and if a sufficient number of fee-paying students have enrolled.

If you wish to audit a class and be assured of a space on the class rolls, you may pay the regular fees and attend the class as any other fee-paying auditor. However in choosing this option, you may not change your status from “fee-paying” to “disabled/senior citizen” classification (where no fees are involved) at some later date and expect to be refunded for the fees you paid at the time of registration.

According to subsection (b), you may be enrolled in a course for academic credit without paying regular fees to The University of Tennessee at Martin. You must make application for admission to the University, register for course(s), meet the requirements of a class for specified grade(s), and have a permanent academic record maintained in the same manner as other students enrolled for credit.

An application fee of thirty dollars ($30) is required. A registration fee of seven dollars ($7.00) per semester hour credit up to a maximum of seventy ($70) for any one semester is also required for those under the credit option.

Textbooks and other class materials must be purchased by the student. Also, you must pay for application fee, late drop fees, parking permit and parking fines and any other fees that aren’t related strictly to tuition.

The existence of permanent disability must be certified by a physician practicing in a medical specialty which you qualify him/her to judge the nature and extent of the disability, or from the agency charged with compensating the disabled person or adjudicating his/her permanent, total disability.

Special Notes:

1. Students auditing classes are under no obligation to attend classes regularly, answer questions, prepare homework assignments, or take examinations. They receive no credit for the class. They may not take part in classroom discussions, laboratory, or field work, except in small classes with the permission of the instructor.

2. Students accepted into classes and earning college credit may participate on the same basis as fee-paying students.

I have read these policies, understand them, and agree to abide by them.

_____ over-60 auditor  _____ total disability auditor  _____ over-65  _____ total disability
(Non-credit student)  (Non-credit student)  (Credit student)  (Credit student)

Print Name  Social Security Number

Signature  Approved

Date