The College of Saint Rose
Albany, New York

ASBO New York
Tuition Discount Application

Students who are current members of ASBO New York (Association of School Business Officials, New York), and who are matriculated in the College’s School District Business Leader Certificate (SDBL) Program, or the MBA/SDBL Program, are eligible to receive a 20% tuition discount. This discount applies to graduate tuition only, and may not be combined with other College-sponsored tuition discount/scholarship programs. The student’s ASBO New York membership must be current during the semester indicated on this application, and a new application form must be submitted each semester. This application applies only to the current semester, and the discount is applicable only for graduate courses which are required for the above mentioned programs of study.

This application form must be submitted directly to ASBO New York each semester, and once verification of membership has been completed, ASBO New York will forward the application to The College of Saint Rose Bursar’s Office. This form is due to ASBO New York on or before each semester’s payment due date. If an application is submitted after the payment due date, any late payment fees, which may have been assessed, will not be waived.

Please note that this discount is based on a current agreement between The College of Saint Rose and ASBO New York, and once approved, will not change for the current semester. Eligibility and approval of the discount in subsequent semesters is subject to any changes made to this agreement.

Questions regarding this discount may be directed to The College of Saint Rose Bursar’s Office, at (518) 458-5464, or to bursar@strose.edu.

ASBO New York membership questions may be directed to membership@asbonewyork.org.

(Student must complete this section)

Student Name
______________________________________________________________

Student ID ___________________________________ Semester/Year __________

Program of Study (Circle One) MBA or SDBL

Student’s Signature __________________________________________ Date __________

Student’s (Saint Rose) Email Address ___________________________ Phone Number ______________

Student: Please email this form to ASBO New York at: assistant@asbonewyork.org, Cc: amanda@asbonewyork.org.

(For office use only)

Date Received/ASBO New York Membership Dates Verified By Date

Date Received/Saint Rose Amount Processed By Date

ASBO New York: Please email completed form to: bursar@strose.edu.

Date Received/Saint Rose Amount Processed By Date