

Spousal Remission Information Form

A student who is the spouse of a Marquette University employee must complete this form the first semester they take a class. Please download form to your computer, complete and save. The form can be sent as an attachment via email to our office at marquettecentral@marquette.edu or you may also send the completed form via fax to (414) 288-4080, or via mail to the following address:

Marquette University
Office of the Bursar
P.O. Box 1881
Milwaukee WI 53201

Student
Name

Student
MUID

Term(s) of
Enrollment

Employee
Name

Employee
MUID

Department

Phone
Extension

Date of Hire
at Marquette

Date

Print Form