

# TUITION REIMBURSEMENT APPLICATION FOR NON-HOLY CROSS COURSES Rev. 12/5/22

Request Date

If you are an Administrative or Hourly employee, benefits eligible working a minimum (27 1/2 hours or more per week for 40 weeks per year,) and have completed three months of employment and work you are eligible to receive tuition assistance to improve your job performance and/or enhance your career opportunities at the College. This application must be completed and submitted to Human Resources for approval at least two weeks prior to the beginning of class. Once the application has been approved, a copy will be returned to you. Retain this copy and use it to receive reimbursement within 60 days of the end of term, filling in grades and payment. Only tuition fees are reimbursable. List other aid if received (this program does not duplicate other aid). Tuition reimbursements can be submitted for up to $2,500 per fiscal year.

**Application Information** *(please print)*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Last name |  | First Name |  | Emp ID |  |  | Date of Hire |
| Title |  |  |  |  |  |  | Department |

# Program Information

|  |  |  |
| --- | --- | --- |
| Certificate/Degree Program | < OR > | Non-Degree Program |
| Associates | Bachelors Other | Undergraduate | Graduate |
| Masters | Doctorate | Vocational/Tech | Other |
| Vocational/Tech | Certificate |  |  |
| Anticipated Degree Date: |  |  |

## School and Location:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Course Title | Course # | Start Date | End Date | Time | Grade | Tuition Cost |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Describe how the course is job-related and/or will enhance your career:**

**Application Acknowledgement and Signature**

In accordance with the Tuition Assistance Program, I certify that I understand I must meet the following conditions:

* The course(s) must be job-related and/or a requirement of the degree/certificate program I am enrolled in.
* The course(s) must be taken outside regular working hours. Courses taken during work hours require manager approval and require the use of vacation or personal time.
* I must obtain a grade of “C” or better.

I also certify that this statement of my costs is complete and accurate to the best of my knowledge and I am receiving no financial assistance with this study except as stated here.

* Manager certification: These courses have been approved as job related or degree/certificate related.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Employee |  | Date |  | Signature of Manager/Supervisor |  | Date |  |

**Application Status** Approved Denied (Rationale listed below)

|  |  |  |
| --- | --- | --- |
| Director, Workforce Development and Talent |  | Date |