**Employee Tuition Assistance Request Form**

Instructions:

* Complete the employee tuition assistance form below and attach descriptive information regarding the course(s) or degree program you wish to enter.
* Meet with your supervisor to discuss your tuition assistance request. If it is agreed that your request meets policy guidelines, the manager will discuss your request with the Department Head and the Human Resources Director. Approval of tuition assistance requests is subject to available funding and department procedures for allocation of tuition assistance/training and education funds.
* Upon completion of the course, submit a copy of your transcripts and itemized receipts to your supervisor.

Employee Name:

Employee ID Number:

Job Title:

Date:

Course title:

Course dates: From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:

Degree sought (if applicable):

Name of educational institution:

Address of institution:

**Course Expenses:**

Tuition: $\_\_\_\_\_\_\_\_\_\_\_

Laboratory Fees: $\_\_\_\_\_\_\_\_\_\_\_

Registration: $\_\_\_\_\_\_\_\_\_\_\_

Books/materials $\_\_\_\_\_\_\_\_\_\_\_

**Total cost $\_\_\_\_\_\_\_\_\_\_**

Development objective (what long-term goal is this program/course intended to help you reach):

Please attach a brief outline of the courses included in the program from the college catalog or program brochure (necessary for initial request only).

I understand that if this request is approved, reimbursement will be contingent upon successful completion of a course with a grade or evaluation equivalent to a “C” or better. I further understand that it is my responsibility to submit all required information at the end of the course to receive reimbursement.

Employee Signature

Date

**DEPARTMENT HEAD APPROVAL**

I have reviewed this request for employee tuition assistance and confirm it meets the following provisions:

The class is relevant to the employee's current job or a reasonably accessible promotional opportunity.

The content offered in the class is effective in keeping the employee abreast of current developments in their professional field or the content meets organizational needs.

Expenses requested are available in the budget for the specific department.

The County ¨ is requiring / ¨ is not requiring the employee to complete this course as part of their current position.

* If the County requires the course, 100% of the cost, including tuition, registration and laboratory fees shall be paid by the County. Assigned textbooks may be reimbursed by the County, and shall become County property at the conclusion of the course if reimbursed.
* If the course is not required by the County, regular full-time employees may be reimbursed 50% of tuition, registration and laboratory fees. Assigned textbooks for these courses will be reimbursed at 50% by the County. Employees shall reimburse the County 50% of the proceeds received if they sell the textbook(s) after the conclusion of the course.

This request is: Approved Not approved

Additional Comments:

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Department Head Signature Date

**HUMAN RESOURCES DIRECTOR APPROVAL**

This request is: Approved Not approved

Additional Comments:

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Human Resources Director Signature Date