



Application Procedures – Tuition Reimbursement

General Information

To apply to participate in the Franklin County Auditor's Office Tuition Reimbursement program, be sure to read carefully:

- your copy of the Tuition Reimbursement Policy in the Employee Handbook
- Procedures information in this packet

The completed **Application for Tuition Reimbursement** form must be submitted and approved by the Director and FCA prior to the start of the third class of the course(s). A completed **Payment Request for Tuition Reimbursement** form and completed **Employee Reimbursement Request** form must be submitted, along with all other information required for that request, within four (4) weeks of course completion.

Note: No employee on an unpaid leave of absence, unauthorized leave of absence, disability or injury leave is eligible.

Application Procedures

Application Form and Required Information

1. Complete the **Application for Tuition Reimbursement** form, which is to be submitted and approved by the Director and FCA prior to the start of the third class of the course(s).
 - NOTE: If you resign, retire, or are separated for a reason other than job abolishment or layoff, you must repay the tuition reimbursement paid by the County for courses completed less than one (1) year prior to the date of separation.
2. Attach the following required information to **each** application form:
 - a. Class schedule
 - b. Brief course description
 - c. Verification of Tuition Cost
 - d. Brief Rationale for Approval for Tuition Reimbursement – Short, written narrative that fully explains the relationship of the course or program to your current job or other jobs within your agency, how the course may impact on knowledge and skill levels, increase productivity, and/or otherwise contribute to your ability to function more effectively.
 - e. Employee Job Description
3. First time applicants please include the following documents:
 - a. Verification of Acceptance in Degree Program, if applicable
 - b. Verification that the school is accredited (by the CHEA or U.S. Department of Education), if requested.

Submitting Application

4. Submit the **Application for Tuition Reimbursement** form along with the required information (listed above) to your Supervisor and Department Director for approval. Final determination on tuition reimbursement will be made by the FCA or designee.
5. Forward the entire packet to Human Resources for review and authorization of request.

Approval/Denial

6. You will be notified of the approval or denial of the request for tuition reimbursement. If your request is denied, rationale specifying the reason(s) for the denial will be sent to you. An applicant whose request has been disapproved at any level may ask for a meeting with the person who denied the application to discuss the reason(s).

NOTE: Please notify Human Resources when cancelling a class after your application has been approved.



Application – Tuition Reimbursement

Employee Information

Name: _____

E-mail: _____ Work Phone: _____

Agency: _____ Job Title: _____ Hire Date: _____

School Information

School Name: _____ Expected Graduation Date: _____

Degree Sought (Bach., Masters, etc): _____ Major/Program: _____

Course Information

Course # & Department	Course Name	# Credit Hours	Online (Yes/No)	Course Dates (Start-End Dates)

Cost Per Credit: \$ _____ x Total Credits: _____ = Total Cost: \$ _____.

I have received grants or scholarships: Yes | No If Yes, what amount: \$ _____.

Amount of Tuition Reimbursement Requested: \$ _____.

Disclaimer

- I understand tuition reimbursement **only** covers instructional fees and course-related text books. It does not cover transportation, lab fees or any other expenses.
- I understand that tuition will initially be paid at my expense and that **I will be reimbursed if I complete the course with a C or better** (or "Pass" on a Pass/Fail course).
- I understand that I am not eligible if I am in an unpaid leave of absence, unauthorized leave of absence or on disability or injury leave throughout the period for which tuition reimbursement has been approved.
- I understand that if I resign, retire, or am separated for a reason other than job abolishment or layoff, I must repay the tuition reimbursement paid by the FCAO for courses completed less than **one (1) year** prior to the date of separation.

I understand & accept this disclaimer: _____ . _____
Employee Signature Date

Approval/Signatures

Approving this reimbursement, I agree that the employee meets all criteria listed in the disclaimer above.

Approve <input type="checkbox"/>	_____	Approve <input type="checkbox"/>	_____
Deny <input type="checkbox"/>	Supervisor Signature/Date	Deny <input type="checkbox"/>	Chief Financial Officer/Date
Approve <input type="checkbox"/>	_____	Approve <input type="checkbox"/>	_____
Deny <input type="checkbox"/>	Director Signature/Date	Deny <input type="checkbox"/>	Human Resources Director/Date
Approve <input type="checkbox"/>	_____	Approve <input type="checkbox"/>	_____
Deny <input type="checkbox"/>	DCOS Signature/Date	Deny <input type="checkbox"/>	Chief of Staff/Date

Amount of Tuition Reimbursement **Authorized**: \$ _____

Denial Reason: _____

- | | |
|--|---|
| Documents to attach with each application: | Documents to attach for first time applications: |
| 1. Class Schedule/Brief Course Description | 1. Verification of Acceptance in Degree, if applicable |
| 2. Verification of Tuition Cost | 2. Verification that school is accredited, if requested |
| 3. Brief Rationale for Approval for course | |
| 4. Job Description | |