

Job-Related Training and Education: Employee Request Form

(Return to **Room 1D02**)

Employee Name: _____ Employee ID#: _____

Department: _____ Bldg. / Room: _____ Phone: _____

Supervisor: _____ Extension: _____

Describe information relative to the course/training program to be considered on this request:

Course Name: _____

Course Number(s): _____

College, University or Sponsoring Agency: _____

Start Date: _____ End Date: _____ Class Day(s), Time(s) _____

Enrolled in Degree Program? Yes No

If yes, describe anticipated degree, major, and anticipated date of degree completion:

Please attach a description of how this course work or training program relates to your current HCPC duty assignment or to a prospective duty assignment and how your successful completion of this education/ training will benefit the university. Please attach any relevant documents or explanations.

I understand that time off from work and reimbursement of allowable expenses may be granted only within HCPC's procedure on Tuition Reimbursement. Reimbursement depends upon successful completion of course work as defined in that procedure. I also understand that the limit of reimbursement is **\$1,800** in a fiscal year. I also understand that graduate hours and any reimbursements over \$5,250 in a calendar year will be considered taxable income and will be paid out through my paycheck.

Signature of Applicant: _____ Date: _____

For Supervisor – Please confirm eligibility requirements and sign

Eligibility Requirements:

- Successfully completed 120-day probationary period (circle one): Yes No
- Full-time employee of UTHSC-H (circle one): Yes No
- Competent rating for last 6 months and not involved in a disciplinary process. Yes No

Supervisor: _____ Date: _____

Please print: _____ Date: _____

Below information to be filled out by Tuition Reimbursement Committee:

Tuition Reimbursement Signature _____ Date _____

Please print _____
Chair, Tuition Reimbursement Committee

Successfully completed course according to procedure?

- | | | |
|---|------------------------------|-----------------------------|
| “C” or better for undergraduate courses: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| "B" or better for graduate courses, or a "P" for pass/fail system): | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Provided original documentation for tuition and grades: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

The Committee Chair will attach copies of the tuition statement, grade report, and RI and forward with a copy of this form to Financial Services.