

PASSAIC COUNTY COMMUNITY COLLEGE

TUITION REIMBURSEMENT APPLICATION

(Program or Course Approval)

TO: Vice Presidents and Other Supervisors

ISSUE/REVISION DATE (S): 4/16/91, 1/14/92

The following form is intended to assist supervisors in their review and evaluation of staff requests for tuition reimbursement. Note, however, that your approval or denial of an employee's reimbursement request should not be based solely on the information solicited by this form. Please conduct a thorough review and evaluation of each case, based on the relevant and current employment agreement (Faculty, Administrators, or Supportive Staff).

Note also that 1) prior presidential approval is required in all cases, and that 2) payment for a previously approved courses/programs will only be made upon submission of evidence that the course (s) were a) taken as approved, b) paid for by the employee, and c) successfully completed. Note further that 3) total reimbursement is not to exceed actual tuition cost nor the prevailing Rutgers University rate, less any reimbursement received or due from sources outside the college.¹ Note finally that this form should *not* be used by an employee to request a tuition scholarship for courses taken at PCCC; tuition scholarship forms are available in (and must be approved by) the Personnel Office.

Date of this Request: _____

Employee's Name: _____ Department: _____

Job Title and Brief Job Description:

Employee's Normal Work Days: _____ and Hours: _____

Institution and Location where Employee Proposes to Study:

¹ But G.I. Bill benefits are excluded from the calculations in condition #3.

Is this an Accredited Institution of Higher Education? Yes

No

Semester(s) or Term(s) of Proposed Study:

Title of Program (if applicable):

(First) Course(s) to be Taken:

Registration Date for the (First) Course(s) to be Taken: _____

Day(s) & Time(s) of These Course(s):

Do the proposed course hours, considering also travel time, conflict with the employee's normal work hours at PCCC?

Yes

No

If so, how much normal work time will be lost per week? _____ hour(s)

How does the employee propose to make up this lost time?

Is this make-up time proposal acceptable to the employee's supervisor?

Yes

No

Are these make-up hours consistent with the employee's job description? (For example, if a counselor proposes to do make-up time between 5:00 and 6:00 p.m., will there be students on campus for her/him to counsel during those hours?)

Yes

No

Will the employee's work during these make-up hours be adequately supervised?

Yes

No

1. Of which bargaining unit (Faculty, Administrators, or Supportive Staff) is the applicant a member?

2. Is the applicant a permanent or a temporary employee?

3. Is the applicant full-time, part-time, and/or a new employee with probationary status? _____
4. Is the applicant seeking approval for:
 - a. a program of graduate study, or
 - b. a program of undergraduate study, or
 - c. individual course(s)²? _____
5. How many credits will be earned (only 6 per term may be reimbursed)³? _____

Complete either question 6 or 7 following:

6. If this request falls under #4a or #4b above (graduate or undergraduate program), did you receive from the applicant:
 - a. a letter or other official notice of the applicant’s acceptance, from the college, department, and/or graduate school in which the applicant proposes to study?
Description of attachment: _____
 - b. a copy of the catalogue or other official description of the program of study, including the course work required?
Description of attachment: _____
 - c. a copy of the catalogue or other official list of requirements for certification, licensure, or successful degree completion?
Description of attachment: _____
7. If this request falls under #4c above (individual courses), did you receive from the applicant for each proposed course a course description copied from the school catalogue or other official publication?
Description of attachment: _____

² According to the Faculty Association Agreement, faculty must be enrolled in a degree, certificate, or license program in order to be eligible for tuition reimbursement.

³ The president may waive this limit for administrators under special circumstances; for faculty, the program maximum is 42 hours.

8. Is the graduate program or course(s) proposed related to the applicant’s current duties at the College and/or -- for administrators – does it meet the institution’s needs and goals (yes or no)?

If so, explain how: _____

9. In the case of a graduate or undergraduate program, has the applicant been advised that course selection must be reviewed in advance of each term of study to determine appropriateness and to deal with possible work schedule conflicts? Yes No

10. If the applicant is receiving tuition reimbursement from any other source, please indicate the source:

and the amount being received: \$ _____

All approvals should be forwarded to the President for final approval. Denials should not be forwarded to the President unless they are being appealed, as follows:

Appeal Check here if the applicant is appealing their supervisor’s and/or dean’s denial. In all such cases, a memorandum from the applicant detailing the alleged grounds for appeal must be attached to this form. Grounds for appeal will be considered sufficient only if they constitute compelling extenuating circumstances not contemplated by the normal provisions for tuition reimbursement.

Authorization:

Supervisor: Approved Denied⁴ Date: _____

Signature: _____ Title: _____

Vice President: Approved Denied Date: _____

Signature: _____ Title: _____

President: Approved Denied Date: _____

Signature: _____ Date: _____

⁴ Note that – by contract – administrators are entitled to a written explanation of denials, citing the reasons for which their requests were denied.