

Educational Support Staff
Tuition Reimbursement
FINAL APPROVAL APPLICATION

Directions: Please submit application within one semester following successful completion of approved course(s) to Human Resources. An official transcript must be sent to HR. Applicants must successfully complete all courses with a 2.0 or higher GPA.

EMPLOYEE NAME: _____ **ID** _____

Please indicate the semester the course was taken:

Spring 20_____

Fall 20_____

Winter 20_____

Please list the courses and the credit hours completed:

Course: _____ # of Credit Hours: _____

Course: _____ # of Credit Hours: _____

Course: _____ # of Credit Hours: _____

Course: _____ # of Credit Hours: _____

By signing below, I verify that the courses taken are a part of my educational and career plan. I agree to work for Jackson Community College for a period of one year for each 24 credit hours covered, on a pro-rated basis, or refund the tuition reimbursement received. This reimbursement may be taken from my final pay before leaving Jackson Community College.

Employee Signature

Date

The committee has reviewed and approved the courses taken meet the contractual requirement.

_____ # of credits x \$ _____ (JCC's tuition rate) = \$ _____ total reimbursement.

Budget code: _____ 01-6600000-1-5197 _____

Director of HR

Date

Cc: _____ Employee _____ Personnel File _____ Payroll