Administrator
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:

____Fall 2010 ____Winter 2011 ____Spring 2011

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 continue my employment with JCC for a period of one year following the conclusion of each course covered, or refund the tuition payment on a pro-rated basis. 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: ____01-660000-1-5197_____

_____ _____
Executive Director of HR Date

Cc: ____Employee ____Personnel File ____Payroll