



# Tuition Reimbursement Request Form Undergrad Level Course – Police Sergeant

## Instructions

To request Pre-Approval for tuition reimbursement, complete this form and return it to your Department Director. A copy of the course description is also required. A receipt of payment will be required when submitting for reimbursement.

## Employee Information

Name: \_\_\_\_\_ Employee Number: \_\_\_\_\_

Position: \_\_\_\_\_ Department: \_\_\_\_\_

## Course Information

Course Name and Number: \_\_\_\_\_

Is course necessary to obtain degree?  Yes  No  N/A

If yes, what degree? \_\_\_\_\_

Name of College or Institution: \_\_\_\_\_

Dates of Course: Starting \_\_\_ / \_\_\_ / \_\_\_ Ending \_\_\_ / \_\_\_ / \_\_\_

Cost: Tuition \_\_\_\_\_ Books \_\_\_\_\_ Total \_\_\_\_\_

How will this course improve your job performance or help you to prepare for future opportunities in your career with the City? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Reimbursement Information

Reimbursement Schedule	
Grade Earned	Reimbursement Schedule for Job-Related Course
A	100%
B	75%
C	50%
D or lower	None

Schedule of Repayment Upon Separation from Employment			
Months of Employment Following Course Completion	Percentage to Be Paid to the City at Separation	Months of Employment Following Course Completion	Percentage to Be Paid to the City at Separation
11	8.33%	5	58.33%
10	16.67%	4	66.67%
9	25.00%	3	75.00%
8	33.33%	2	83.33%
7	41.67%	1	91.67%
6	50.00%	0	100.00%



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## Authorization & Signature

I understand that reimbursement will be based on the grade earned and agree that, as a condition of receiving tuition reimbursement, I will reimburse the City should my employment with the City terminate less than 36 months after completion of this course and I hereby authorize the City to deduct any amount owed to the City according to the schedule above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Department Director Pre-Approval

I certify that this employee's request for pre-approval for tuition reimbursement meets the criteria as indicated below:

<input type="checkbox"/> Yes	Employee is a full time employee in good standing who has completed a minimum of 1 year of service with the City.
<input type="checkbox"/> Yes	Employee has not had a disciplinary suspension of more than 5 working days during the last 12 months (2 full 24 hour shifts for employees working 24 hour shifts).
<input type="checkbox"/> Yes	Employee has received an average or better rating on his/her most recent performance evaluation.
<input type="checkbox"/> Yes	This course is directly related to the employee's current position OR is to learn a second language.
<input type="checkbox"/> Yes	Approval of this request will place the total amount reimbursed for this employee during the fiscal year at \$5,000 or less.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Human Resources Approval

Course Pre-Approved:  Yes  No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Reimbursement:

Grade Received: \_\_\_\_\_ Approved to reimburse at: \_\_\_\_\_ By: \_\_\_\_\_