

# CSUB Foundation Educational Assistance Program Request for Tuition Reimbursement Form

<b>Receipt Stamp</b>
Date _____
Comment _____
_____
_____

The request for Tuition Reimbursement must be received in the *Department of Human Resources* a minimum of *three weeks* prior to course registration. This program is effective based upon availability of funds as identified through budgetary hearings each fiscal year.

Employee Name \_\_\_\_\_ Date \_\_\_\_\_

SSN \_\_\_\_\_ Date Employed Full-Time \_\_\_\_\_

Degree of Study \_\_\_\_\_ Semester/Term \_\_\_\_\_

Institution \_\_\_\_\_ Address \_\_\_\_\_

**COURSE(S) REQUESTED** Please list below the college credit course(s) for which you are requesting tuition reimbursement.

COURSE NAME	COURSE #	SECTION	TIME	CREDIT HOURS	TUITION AMOUNT
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
<b>TOTAL</b>					_____

Your signature below verifies that these statements are true:

- I have been employed at CSUB Foundation in an eligible position for at least six months prior to the start date of the course(s) listed above.
- After completion of this course(s), I will send evidence of satisfactory completion {grade(s) of "C" or better and transcripts} and a copy of my payment bill to the Department of Human Resources.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

**CRITERIA FOR ELIGIBILITY**

- 1) Long-term, benefits-eligible employees, regularly scheduled to work at least 20 hours a week,
- 2) An employee must have been employed by CSUB Foundation for at least six months prior to the course start date,
- 3) Courses are job-related and/or lead to an undergraduate or graduate degree,
- 4) Eligible tuition expenses include tuition only,
- 5) Reimburse 100% of tuition for up to 6 credit hours based upon a grade of "C" or better,
- 6) Participation in the program is based upon availability of funds and when the request is received (first come, first served),
- 7) All courses must be taken outside the normal work day, unless release time is granted with supervisor approval and based upon the operational needs of the department,
- 8) Human Resources will notify the applicant of approval within 10 business days of receipt of this form, and
- 9) The employee pays the tuition and required fees in accordance with the registration procedures required by the applicable educational institution for the approved course(s). All grades and proof of payment must be submitted to the Department of Human Resources within 30 days of completing the course. If an employee fails to submit the required documentation during this period, the tuition reimbursement will be denied.

**APPROVAL**

Human Resource Director (employment verification)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Foundation Manager (verification of funds)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Executive Director, Foundation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date