



## APPLICATION FOR DEGREE PLAN APPROVAL

### PROCEDURE

Step 1: Tuition Reimbursement

EMPLOYEE:

1. Completes form
2. Attach required documents and submit application to the Department

Director DEPARTMENT DIRECTOR:

1. Review application and additional documents
2. Make a recommendation or decline recommendation
3. Submits application and additional documents to the HR

Department HR DEPARTMENT:

1. Review application for completion
2. Review fund availability
3. Forward application to City Manager's

Office CITY MANAGER:

1. Review application
2. Approve or decline application
3. Send original documents and application to HR Department
4. Send a copy to the employee



**APPLICATION FOR DEGREE PLAN APPROVAL**

Name: \_\_\_\_\_ Date Employed: \_\_\_\_\_

Title/Position: \_\_\_\_\_ Department: \_\_\_\_\_

Name of College or University: \_\_\_\_\_ Degree Plan/Major: \_\_\_\_\_

Semester/Year Course(s) to Commence: \_\_\_\_\_

Please state how the degree meets the objectives of the Tuition Reimbursement Program:

\_\_\_\_\_  
\_\_\_\_\_

A copy of degree plan must be attached to this request.

Are you eligible for or will you be receiving any other financial assistance for your education? Yes  No

Employees receiving tuition assistance from a source that does not require repayment (Veteran’s benefits, grants, scholarships, etc.) are required to submit reimbursement requests for the balance of the tuition covered by the alternate source.

The City of Stephenville has the right to audit the employee’s educational and financial records that may be contained in the employee’s records at the institution attended. Any right that the employee may have according to the Family Education Rights and Privacy Act of 1974, or any similar act, are waived by acceptance of tuition reimbursement. By signing this application, I acknowledge that I am familiar with the requirements for tuition reimbursement according to the City’s Personnel Policy and agree to abide by those requirements.

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

\_\_\_\_\_  
Date



**DEPARTMENT DIRECTOR ACTION**

Recommend tuition reimbursement       Do not recommend tuition reimbursement

Reason for declining tuition reimbursement: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Department Director Signature

\_\_\_\_\_  
Date

**CITY MANAGEMENT ACTION**

Request Approved       Request Denied

\_\_\_\_\_  
City Manager Signature

\_\_\_\_\_  
Date