

FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

EDUCATIONAL ASSISTANCE REIMBURSEMENT

The District shall maintain a fund for assisting unit members to pay for required tuition, fees, and textbooks to attend any work-related class at an accredited college or university. The fund shall be \$30,000 per year. Remaining money shall be rolled over to the next year but the maximum fund shall be not more than \$40,000. Educational Assistance may be used during a Staff Development Leave.

1. The worker shall provide evidence of successfully completing the class.
2. A worker may receive up to a maximum of \$1,000 per academic year.
3. Assistance shall be on a first come first serve basis, until the fund is depleted.

Include official transcript verifying successful completion of the work-related class and receipts identifying tuition, fees and textbooks. Parking fees are not included.

To Be Completed By The Employee:

| | |
|---|----------------------------|
| Employee Name | -CWID |
| Job Title: _____ | Phone: _____ |
| Amount of Educational Assistance Requested: | Tuition: \$ _____ |
| Date of Course(s): _____ | Fees: \$ _____ |
| Date Course(s) Completed: _____ | Textbooks: \$ _____ |
| | Total: \$ _____ |
| Information on course(s): _____ | |
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|--------------------|------|
| Employee Signature | Date |
|--------------------|------|

To Be Completed by the Administrator:

I verify that this class is a work-related class.

| | | |
|-------------------------------------|---------------------------|------|
| Administrator's Name (please print) | Administrator's Signature | Date |
|-------------------------------------|---------------------------|------|

***** (For Human Resources Use Only) *****

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|---------------------------|----------------------------|
| Director, Human Resources | Amount Reimbursed \$ _____ |
|---------------------------|----------------------------|

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|------------------|------------------------------|
| Processor: _____ | Date of Reimbursement: _____ |
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