



COUNTY OF SANTA CLARA TUITION REIMBURSEMENT REQUEST



Employee Information-For approval, form must be filled out completely. **For detailed instructions, read both the front and back of the form**

Last Name	First Name	I.D. Number *	Applicable Contract or Fund
<input type="text"/>		<input type="text"/>	<input type="checkbox"/> 715 <input type="checkbox"/> CEU Other _____
Home/Mailing Address		Job Title	
<input type="text"/>		<input type="text"/>	
City	State	Zip	Department Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Today's Date	Business Phone	Pony Address	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

For Office Use Only

Document ID#

Contract Maximum \$ _____

Amount in System \$ _____

Total Available \$ _____

Tax Questionnaire Sent

Course Information *Claims must be submitted within two months of the ending date or before the end of the fiscal year, whichever comes first.*

Course or Class Title	If License Renewal, provide expiration date:	Beginning Date	Registration Cost
1. _____		_____	\$ _____
2. _____		Ending Date	Required Materials \$ _____
3. _____		Final date to submit claim for payment (2 months)	Total Requested \$ _____
School or organization providing the training		Are you receiving reimbursement from any other source? Y ____ N ____	

Relationship or Value of Course(s) to Job and/or County (attach additional page, if necessary.)

I request reimbursement for the above course(s) under the Educational Assistance Program. I understand that only those expenses up to the fiscal year limit applicable to the contract covering my position code are reimbursable and that only the required costs needed for the course(s) will be reimbursed. I understand that this form and all necessary documents required to complete the claim (see back of form) must be received by Employee Development no later than two months after completion of the course or by the end of the fiscal year, whichever comes first. If after reimbursement, I do not submit an acceptable proof of completion within two months after completion of the course, I authorize the total amount reimbursed to be deducted from my pay check. If I leave County employment before completion of the course, I authorize deduction of the full amount reimbursed. If I leave County employment within one year of completion of the course, I authorize deduction of one-half of the amount reimbursed.

I hereby certify under penalty of perjury that my claim and the items, amounts and statements as herein set are true and correct and that no amount claimed has been reimbursed by any other source.

Is this course/conference held during your regularly scheduled work hours? Y ____ N ____ If yes, number of hours away from work per pay period ____

Total Requested \$ _____ Employee Signature _____

Tuition Reimbursement forms require managerial approval. If you checked "Yes" above, your manager must sign below at least 10 days prior to the training, unless your contract reads differently. If you checked "No" above, your manager must sign below at least one day prior to the training.

Did the employee meet the above date requirements? Y ____ N ____ Manager's signature: _____

The funds for your Tuition Reimbursement request have been encumbered. To receive your reimbursement, forward proof of cost, payment and completion as detailed on the back of this form to the Employee Services Agency, Employee Development no later than two months after completion of class.

Your request for Tuition Reimbursement has been denied for the following reasons:

Date Processed _____

ESA Staff Signature _____

Amount Encumbered _____

If you have any questions or require any assistance, call Employee Development at 299-6889

INSTRUCTIONS FOR COMPLETING TUITION REIMBURSEMENT REQUEST

The following information is offered as a guideline to the Tuition Reimbursement program and not intended to replace or change the information in the applicable bargaining unit agreement.

Tuition Reimbursement (TR) pays 100% of registration, tuition, and other required materials and fees up to the initial amount requested or the individual employee maximum per fiscal year, as defined by your bargaining unit agreement. It does not cover parking, travel, lodging, exams, or membership fees. For reimbursement, there are three main steps that you must complete. The steps can be done separately or combined, depending on your preference.

Approval: Complete “Employee Information” and the “Course Information” sections of the form and submit to the Employee Development office. Incomplete forms will not be processed. (Be sure to include both the Department name and the Pony Mail address on the application.)

The Course Information section requires the employee to state the value of the class to the county. Please be specific. For example, a tennis class taken for personal enrichment does not have (academic) value to the county. However, this same class taken as a requirement to complete a college degree does have value to the county and will be approved.

Submit your completed TR form to Employee Development (ED) for approval. For your records, make copies of all forms you submit. The ED staff will process your request and return it to you at your Pony Mail address within 10 working days after it is received. This step, if done before the event, confirms that the funds have been set aside to reimburse you before you pay for the class.

Employee Development must receive your initial claim no later than two months after the last day of the class or by the end of the fiscal year, June 30th, whichever comes first. If you submit your claim for the first time two months after the event, your packet must be ready for payment, containing your proof of cost, proof of payment, and proof of completion to be approved and paid. Determination of the Fiscal Year to which the claim will be assigned is based on the beginning/start date of the course. A course *beginning* on June 20 and *ending* on August 1 will be assigned to the current Fiscal Year which ends on June 30 and must be received by ED no later than June 30th of the fiscal year in which the course begins. Any initial claim received after June 30 for a class that begins before June 30 will be denied.

Payment: Attach cost and payment documentation. Proof of Cost includes a copy of the brochure or catalog or a detailed receipt which documents the title of the course, the dates and cost of the training. Proof of Payment is a cancelled check, a check plus the bank statement showing the check having cleared, or a detailed receipt. Both “proofs” must be satisfied in order to get reimbursed. **YOU DO NOT NEED TO SHOW A GRADE OR PROOF OF COMPLETION BEFORE YOU ARE REIMBURSED!** Your grade is still due, however, within two months of completion of your course.

The ED office will audit the documentation and, if complete, mail the reimbursement check to the mailing address you have provided on the form. The warrant will be processed within 4-6 weeks of receipt of the completed documentation. All documentation must reach the ED office no later than two months after the ending date of the training.

Completion: Within two months of the ending date of the class, you are required to provide Proof of Completion, showing that you completed the course successfully. If a grade is issued, provide a copy of your grade of “C” or better. If you opted for a pass/fail grade, provide a copy showing you passed the course. If no grade is issued, provide a copy of your certificate of attendance or your CEU certificate. If no other proof of completion is issued, a memo from your supervisor stating that you attended the event will suffice.

If you have been sent a reimbursement check and you do not provide proof of successful completion by the deadline, you will be sent a letter asking that you pay the money back or provide proof of completion. If you do not respond to the letter, the amount you received will be deducted from your paycheck without further notification.

Pony or Mail your completed form to:

Employee Services Agency, Equal Opportunity and Employee Development Division
1641 N. First St., Suite 200
San Jose CA 95112

For questions, phone:

(408)299-6889