

Citizens
Training and Professional Development Department

TUITION INCENTIVE APPLICATION
APPLICATION FOR: FALL /SPRING /SUMMER SEMESTER – 2018
(CIRCLE ONE)

FOR QUESTIONS CONTACT: LAURA FRANZEN 293-1111 X5621; JASON PERSAN 293-1111X5363

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| Employee Information: All fields must be completed | |
| Name: | Program/Department: |
| Home Address: | No. of hours scheduled per week: |
| Job Location: | Position: |
| Hire Date: | Daytime Telephone No.: |
| | Email Address: |
| College/School Information: All fields must be completed | |
| Course(s) to be taken this semester: | |
| Intended Degree and Major: | Status in College/School (please check one): ___P/T ___F/T ___Non-matriculated |
| Name of College/School: | #Credits this semester: _____ |
| In a couple of sentences please explain how you intend to use this degree at Citizens: _____ _____ _____ | |
| Are You Receiving Any Other Form of Tuition Assistance? No _____ Yes _____ If yes, please specify: | Total amount of awards, scholarships, grants, etc. (not including loans): _____ |
| Please check one: ___ I have worked for the agency for 6 months to 3 years ___ I have worked for the agency for 3-5 years ___ I have worked for the agency for 5 years or more | |
| Authorization: | |
| <i>As a condition of receiving tuition assistance, I agree to remain in the employ of Citizens for at least one year from the date of the last payment I receive or I will be subject to repayment to Citizens the total amount of tuition incentive monies received from Citizens.</i> | |
| Employee's Signature: | Date: |
| Program Director's Signature: ___ APPROVED ___ NOT APPROVED/REASON | Date: |

PLEASE COMPLETE ALL INFORMATION & RETURN THE APPLICATION AND THE REIMBURSEMENT POLICY ACKNOWLEDGEMENT TO LAURA FRANZEN PLAINVIEW MAIL DROP # 37 OR FAX 470-9056