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| **METROPOLITAN COMMUNITY COLLEGE****Education Fund Application – 2020-21** |
| Name (print/type) |       | Office Phone Number |       |
| Date Hired as Regular (non-temporary)Employee |       | MCC ID Number |       |
| Position |       |
| Educational Institution  |       | Degree Sought |       |

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| Course Number | Graduate Course? (Yes/No) | Course Name or Description | Numberof Credit Hours | Date Course Begins | Date Course Ends | Total Tuition Amount |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |

1. **Explain how the completion of these educational endeavors will improve or enhance your teaching skills and/or knowledge in a manner that is beneficial to the College. Attach a copy of the course description for each course listed.** **Note: Reimbursement is for tuition expense only. No student fees, course fees, books, supplies, parking fees or other expenses are eligible for reimbursement. Expenses related to licensure or certification renewal are not eligible for reimbursement.**

Will you receive any other financial assistance (scholarship, fellowship aid, GI benefits, grants, or a similar program)? Yes [ ]  No [ ]  If yes, how much?

If education funds are granted, I acknowledge and agree to the following conditions:

1. I agree to continue employment at the College for the required period of time after receipt of the monies. If I fail to continue employment for the specified time, I will make restitution to the College for the education assistance received as follows:
* 0 years if the amount received is less than $500 in an academic year;
* 1 year if the amount received is between $500-$1,500 in an academic year;
* 2 years if the amount received is between $1,501-$2,500 in an academic year;
* 3 years if the amount is greater than $2,500 received in an academic year.
1. **Within fifteen (15)days after the approved course has ended, I must submit a copy of the grade report or transcript of grades and the original receipt or other official document showing a breakdown of tuition and fees so that the reimbursable tuition allowable under the guidelines can be identified.** Said documentation is to be sent to Human Resources (FOC 32). In addition, I must pass the course(s) with a grade of "C" (not a "C-") or better at the undergraduate level and a grade of "B" (not a "B-") or better at the graduate level. For pass/fail courses, only "pass" grades will be eligible for reimbursement.
2. I understand that I may not receive education fund assistance during the fiscal year in which I take a College-approved sabbatical.
3. If it is discovered that the funds authorized through the MCC Education Fund represent a duplication of financial support received from another source (scholarship, fellowship aid, GI benefits, grants, or a similar program), the College may deduct from my wages any payment resulting from the overlap of benefits. (Example: If the employee requested and received tuition assistance in the amount of $1,000 but also received a tuition scholarship in the amount of $500, the result is a $500 duplication of benefits. The employee would need to repay the College $500).

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| Signature of Applicant | Date |

**\*\*\*ATTACH A COURSE DESCRIPTION FOR EACH COURSE LISTED IN YOUR REQUEST\*\*\***

**Miscellaneous Information**

* To be eligible, applicants must have completed two full contract years at MCC as a full-time regular Academic Advisor, Counselor, or Faculty member by July 1 of the fiscal year in which the education assistance is granted. See Education Fund Procedural Guidelines for more information about eligibility.
* Individuals who have been awarded sabbaticals may not receive education assistance during the fiscal year in which the sabbatical is taken.
* Application Deadlines: July 1st  annually. Note: If there are unallocated funds available, a second application period will be opened with a December 1st application deadline.

**APPLICANTS DO NOT NEED TO SECURE COMMITTEE MEMBER SIGNATURES. THE FOLLOWING SECTION WILL BE COMPLETED BY THE REVIEW COMMITTEE DURING EVALUATION OF THE REQUESTS**.

# COMMITTEE SIGNATURES FOLLOWING REVIEW OF APPLICATIONS

# MCC College Representative (Signature) Date Reviewed

# MCC College Representative (Signature) Date Reviewed

# MCC Education Association Representative (Signature) Date Reviewed

# MCC Education Association Representative (Signature) Date Reviewed

# SEND TO HUMAN RESOURCES AFTER SIGNATURES

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|  |  |  |  | Grade and payment documentation submitted: [ ]  Yes [ ]  No |
| Amount Approved\* |  | Denied |  |  |
|  |  |
| \*Note: Some or all of this amount may be taxable. | Human Resources Representative – Signature & Date |