

TUITION REIMBURSEMENT FOR SUPPORT STAFF

Chester Upland School District agrees to reimburse full-time bargaining unit employees covered by this Agreement for tuition only if the following conditions are met:

Prior approval must be received from the Superintendent, or their designee. Courses should be in the member's field of assignment or in the general education curriculum. Please complete the below **TUITION REIMBURSEMENT APPLICATION FOR COURSEWORK** *prior to the start of your courses*.

If the application is approved by both Human Resources and the Superintendent, bargaining unit members **must submit an official transcript, a receipt for payment, and a copy of the Superintendent's, or their designee's approval** *no later than six weeks following the completion of the course*.

Bargaining unit members shall be eligible for tuition reimbursement for courses completed after one year of employment with the Chester Upland School District (CUSD).

The maximum rate of reimbursement will be at the cost per credit of the Pennsylvania State University; no one will receive more than 100% of the cost of tuition.

Bargaining unit members must earn a grade of "B" or better or "P" in a pass-fail graded course.

Bargaining unit members will not be reimbursed for any tuition costs for which he or she received grant funding from any source.

CUSD will pay tuition reimbursement three times (3x's) per fiscal year. Tuition Reimbursement payments will be issued the pay date immediately following School Board approval in October, February, and May.

Bargaining unit members may receive tuition reimbursement up to a maximum of twelve (12) graduate credits or continuing education credits per year at the rate of the cost per credit at the Pennsylvania State University.

A bargaining unit member who resigns his or her employment with CUSD must repay the District for the tuition reimbursements that he or she received in the one (1) year preceding his or her resignation.

**CHESTER UPLAND SCHOOL DISTRICT
TUITION REIMBURSEMENT APPLICATION FOR COURSEWORK**

INSTRUCTIONS: Please complete Part I of the form and submit it to the Office of Human Resources. Retain a copy for your records. One full year of service must be completed before classes can be submitted for approval.

PART I (ALL INFORMATION MUST BE COMPLETED)

EMPLOYEE NAME _____ JOB ASSIGNMENT _____

SCHOOL/DEPARTMENT _____ DATE OF HIRE _____

CERTIFICATION _____ COLLEGE/UNIVERSITY _____

PPID NO. _____ TOTAL AMOUNT REQUESTED _____

SESSION: (Circle One) **FALL** **SPRING** **SUMMER**

LINE	COURSE NUMBER	CREDITS/HOURS	START DATE-END DATE	COURSE TITLE
1				
2				
3				
4				

Is this for a Pennsylvania Teaching Certification Program? Yes No
 Are you also seeking a salary adjustment? Yes No

Please identify the relationship of the course to your area of specialization, and how the course will benefit you at the district. **(Attach a brief outline of the course from the college catalog or program brochure.)**

I hereby apply for approval of the courses listed above; I understand that any Tuition Reimbursement is processed after I have provided the Human Resources Office with an OFFICIAL TRANSCRIPT and a DETAILED PAID RECEIPT. CUSD shall reimburse tuition under conditions outlined in my assigned bargaining agreement. If I terminate my employment within one (1) year of receiving Tuition Reimbursement, CUSD shall be entitled to repayment as outlined in the current bargaining agreement. I further understand that reimbursement is disseminated from a shared pool of funds, and disbursement is contingent upon base fund availability and concurrent member requests. Course Pre-approval does not guarantee that the total amount requested will be dispersed.

Employee Signature _____ **Date** _____

EMPLOYEE NAME _____ JOB ASSIGNMENT _____

PLEASE DO NOT WRITE BELOW THIS LINE

PART II (TO BE COMPLETED BY A HUMAN RESOURCES REPRESENTATIVE)

- Eligible Employee meets all requirements for Tuition Reimbursement.
- Eligible Employee is on an Emergency Permit and course/courses will be applied toward obtaining a Pennsylvania Certification.
- Eligible Employee has not completed one year of employment and is enrolled in a Pennsylvania Certification Program.
- Ineligible Employee is on an Emergency Permit and course/courses will not be applied to obtaining a Pennsylvania Certification.
- Ineligible Employee has exceeded the maximum number of credit hours within the period outlined in the bargaining agreement.
- Ineligible Employee has not completed one year of employment and is not enrolled in a Pennsylvania Certification Program.

Human Resources Representative Signature _____ **Date** _____

PART III (TO BE COMPLETED BY THE SUPERINTENDENT)

LINE	STATUS	REASON
1	<input type="checkbox"/> Approve	The course/courses <i>do adhere</i> to the bargaining unit member’s field of certification, assignment, or the general education curriculum.
	<input type="checkbox"/> Deny	The course/courses <i>do not adhere</i> to the bargaining unit member’s field of certification, assignment, or the general education curriculum.
2	<input type="checkbox"/> Approve	The course/courses <i>do adhere</i> to the bargaining unit member’s field of certification, assignment, or the general education curriculum.
	<input type="checkbox"/> Deny	The course/courses <i>do not adhere</i> to the bargaining unit member’s field of certification, assignment, or the general education curriculum.
3	<input type="checkbox"/> Approve	The course/courses <i>do adhere</i> to the bargaining unit member’s field of certification, assignment, or the general education curriculum.
	<input type="checkbox"/> Deny	The course/courses <i>do not adhere</i> to the bargaining unit member’s field of certification, assignment, or the general education curriculum.
4	<input type="checkbox"/> Approve	The course/courses <i>do adhere</i> to the bargaining unit member’s field of certification, assignment, or the general education curriculum.
	<input type="checkbox"/> Deny	The course/courses <i>do not adhere</i> to the bargaining unit member’s field of certification, assignment, or the general education curriculum.

Superintendent Signature _____ **Date** _____

