Citizens Training and Workforce 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

TOR QUESTIONS CONTINUE TO ENGRIPHICAL TRANSPORT		11501(1216)11(2)0 1111110000
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/TF/TNon-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? Total amount of awards, scholarships, grants, etc.		
No Yes (not includi		
If yes, please specify:		,
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:		
As a condition of receiving tuition assistance, I agree to remonstance of the last payment I receive or I will be subject to repayment freceived from Citizens.		
Employee's Signature:		Date:
Program Director's Signature:		Date:
APPROVED		
NOT APPROVED/REASON		

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