Citizens

Training and Professional Development Department

TUITION INCENTIVE APPLICATION APPLICATION FOR: FALL /SPRING /SUMMER SEMESTER - 2019 (CIRCLE ONE)

FOR QUESTIONS CONTACT: LAURA FRANZEN 293-1111 X5621

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		luding loans):	
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 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.			
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