



An Affiliate of  UnityPoint Health

EDUCATIONAL EXPENSE REIMBURSEMENT REQUEST

See back of this document for policy and procedure information

PART I - TO BE COMPLETED BY APPLICANT

NAME: _____ DATE: _____
DEPARTMENT: _____ POSITION: _____
SCHOOL/COLLEGE YOU PLAN TO ATTEND: _____

Course Number	Title of Course	Course Beginning Date	Course Ending Date	Number of Credits	Tuition

Note: All applicants must attach an official description of course content, as well as official verification of the expense.

Are you eligible for other Grants, Scholarships, or G.I. Benefits? ☐ Yes ☐ No
If yes, explain: _____

Have you received previous Educational Expense Reimbursement from LCHC? ☐ Yes ☐ No
If yes, explain: _____

Are you working toward a Certificate or Degree? ☐ Yes ☐ No
If yes, explain: _____

Give specific reasons for taking course(s) as they relate to your present or future work at LCHC: _____

PART II - TO BE COMPLETED BY DEPARTMENT MANAGER

☐ Recommended ☐ Not Recommended

Reason for recommendation or lack of recommendation: _____

PART III - TO BE COMPLETED BY HUMAN RESOURCES

☐ Approved ☐ Not Approved

Comments: _____
Human Resources Signature: _____ Date: _____
_____ Copy to applicant (date)

LUCAS COUNTY HEALTH CENTER
Chariton, Iowa
Policies and Procedures

SUBJECT/TITLE: Educational Expense Reimbursement	Policy #	510-1
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	Effective	Date 9/2005

PURPOSE:

The Educational Expense Reimbursement Program is designed to assist employees with educational expenses in areas mutually beneficial to them and to LCHC. The program is only for tuition reimbursement for those courses which have been approved and completed satisfactorily.

Excluded from this program are professional meetings, conferences, lodging, meals, transportation, extra-curricular materials, and late fees.

TO QUALIFY:

To the extent of available budgeted funds, LCHC will reimburse the cost of tuition.

LCHC employees will not be compensated for time spent in the classroom.

Full-Time Employees: Regularly scheduled full-time employees are eligible if they have been **actively employed for six consecutive months**. The maximum financial assistance per employee each fiscal year (July 1 – June 30) is \$1,000.

Part-Time Employees: Regularly scheduled part-time employees are eligible if they **work an average of 20 hours or more per week and have been actively employed for twelve consecutive months**. The maximum financial assistance per employee each fiscal year (July 1 – June 30) is \$500.

COURSE ELIGIBILITY:

To qualify for this program, the course of study must:

- Lead to improvement in knowledge and/or skills in the employee's present job, or a future job to which the employee could transfer within the facility.
- Be offered at a recognized college, university, or technical/trade/business school or be part of a recognized specialty certification program.
- Be approved through the application process.
- Not conflict with the employee's work schedule.
- Not have total payment provided for the specific course by a scholarship or other financial grant. If partial payment is being received from another source, this will reduce the assistance amount.

JOB PERFORMANCE:

Any reimbursement of tuition is dependent upon the employee's satisfactory performance of his/her job. This benefit shall be revoked if job performance is considered unsatisfactory **as indicated in the employee's job evaluation and/or on a performance improvement plan**.

APPLICATION PROCESS:

Applications are available from the Human Resources Department. Applications shall be submitted at least three weeks prior to the starting date of the course of study. This is to facilitate processing and to give employees sufficient notice in the event that the application cannot be approved.

1. The Departmental Supervisor shall sign and date the application after determining the benefit of the course to the employee and to LCHC.
2. The application shall then be sent to the Human Resources Departmental for approval. Notification of the action taken will be sent to the employee.

PAYMENT OF THE BENEFIT:

1. The employee shall route a copy of the course completion document and paid receipt to the Human Resources Department.
2. At that time, payment to the employee of the approved amount will be processed.

Applicants to whom assistance is granted will be expected to complete a term of employment of not less than 12 months from the date of expense reimbursement. Those who do not comply with this agreement will be expected to fully refund LCHC financial assistance received through this program.