



ADMINISTRATIVE PROCEDURES

Subject: Education Assistance	Procedures # 7.3	Page 1 of 1
	Effective: 07/01/10	Revised:
GM Approval: 07/01/10	Date Approved:	

PURPOSE

The Salinas Valley Solid Waste Authority supports and encourages employees who wish to continue their education to secure increased responsibility and growth within their professional development. In keeping with this philosophy, the Authority has established a reimbursement program for expenses incurred through state credited institutions of learning. If you are a full-time regular employee and have completed your probationary period, you are eligible for participation in this program as long as the courses are for a job-related degree or course.

POLICY

The company will reimburse up to a maximum of \$2,000.00 per fiscal year incurred by an employee for continuing education through an accredited program that either offers growth in an area related to his or her current position. This can include college credit courses, continuing education unit courses, seminars and certification tests. Seminars and certification courses must be approved in advance by the employee's Supervisor, Manager, the Administrative Manager and General Manager/CAO. You must secure a passing grade of "C" or its equivalent or obtain a certification to receive any reimbursement. Expenses must be validated by original receipts and a copy of the final grade or certification must be presented to show hours and certification received.

To receive educational reimbursement, employees should follow the procedures listed here:

- The employee should provide his or her manager with information about the course for which he/she would like to receive reimbursement.
- The pre-approval section of the educational reimbursement form should be completed, and all the appropriate signatures obtained **prior** to enrolling.
- The employee should submit the form to HR. A copy will be filed in the employee's file. The employee will maintain the original until he or she has completed the course. Once signatures have been received, the employee is eligible to enroll in the course.
- Upon completion of the course, the employee should submit a educational reimbursement form with the reimbursement section completed, including appropriate signatures, as well as receipts and evidence of passing grade and certification.
- The HR department will process the reimbursement.

Employees may be eligible for an additional \$500.00 by forfeiting their Physical Fitness/Wellness reimbursement benefit and applying the benefit toward this policy.

Any questions or comments regarding this policy should be directed to the Administrative Manager.

*Forms attached related to this policy: 1) Request for Educational Assistance Form
2) Reimbursement Form

REQUEST FOR EDUCATION ASSISTANCE PROGRAM PRE-APPROVAL

This form should be submitted to Human Resources prior to requesting funds through the Education Assistance Program. Once a program has been approved, submit the Request for Education Assistance Reimbursement form for specific classes.

Employee Name: _____ Department _____

Date: _____ Semester _____

SELECT PROGRAM

Degree

<input type="checkbox"/> Associate's	<input type="checkbox"/> Bachelor's	<input type="checkbox"/> Masters	<input type="checkbox"/> JD	<input type="checkbox"/> PhD

<i>Name of Program</i>				

Certification

<i>Title of Certification</i>

EDUCATIONAL INSTITUTION

Name: _____

City, State: _____

ESTIMATES FOR EDUCATION AND BOOKS

	Education	Books	Total
Course _____			
Course _____			
Course _____			
Total			

ATTACH (check which item(s) attached)

For Certificate: Certificate Requirements

For Degree: Letter of Acceptance *and* Class Schedule

SIGNATURES FOR ADVANCE APPROVAL *You will receive return confirmation from human resources.*

I understand that if I receive payment for education assistance from the company, and I voluntarily terminate within one year of completion of a course for which I received payment, the company may withhold the pro rata share of the funds from my paycheck for repayment.

Employee: _____ Date: _____

Manager: _____ Date: _____

Finance Manager: _____ Date: _____

General Manager: _____ Date: _____

FOR HR USE ONLY

HR Tracking: Approval: _____ Date: _____

If not approved, reason why: _____



REQUEST FOR EDUCATION ASSISTANCE REIMBURSEMENT

Employee Name: _____ Department: _____

Date: _____ Semester: _____

COURSE INFORMATION

Course _____

Dates _____ Start (month/day/year) _____ Completion (month/day/year)

Grade _____

Course _____

Dates _____ Start (month/day/year) _____ Completion (month/day/year)

Grade _____

Course _____

Dates _____ Start (month/day/year) _____ Completion (month/day/year)

Grade _____

SELECT PAYMENT OPTION

	Education	Fees	Books	Total
Total				

Attach receipts and copy of grade. Allow 10 working days to process.

SIGNATURES FOR PAYMENT

By signing below, I agree that upon voluntary termination within one year of completion of a course for which I received Education Assistance, the company may withhold the pro rata share of the funds from my paycheck for repayment.

Employee: _____ Department: _____ Date: _____

FOR HR USE ONLY

HR Tracking Approval: _____ Date: _____

Finance Manager Approval: _____ Date: _____

If not approved, reason why: _____

PO# _____ Total PO Amount: _____ (\$2,000.00 max per FY) Date forwarded to AP: _____

__ Personnel File