



TUITION REIMBURSEMENT APPLICATION

To apply, the following documents must be submitted to your Appointed Authority/Elected Official, and then forwarded to the Human Resources Department for approval before classes begin.

Application & Acknowledgement

Tuition/Fee Schedule

Course Description(s)

NAME: _____ EMPLOYEE #: _____

JOB TITLE: _____ DEPARTMENT/OFFICE: _____

HIRE DATE: _____ EMPLOYMENT STATUS: *Regular, Full Time (40 hrs/week)* *Part-time (20-39 hrs/week)*

ACCREDITED UNIVERSITY, COLLEGE, VOCATIONAL, OR TRADE SCHOOL:

ADDRESS: _____
Street City State Zip Code

TITLE OF COURSE: _____

COURSE DATES: _____ CREDIT HOURS: _____ COST OF COURSE(S): _____
Start/End Dates Attach a copy of tuition/fee schedule from the college catalog.

List your degree plan and describe how the course(s) will enhance skills and knowledge required for your current position or ultimate career goals. If the course(s) is a general education class, please attach a copy of the requirements needed to complete the degree.

I certify to the best of my knowledge, the above information (including all attachments) is correct, complete, and adheres to the requirements listed in the Larimer County Tuition Reimbursement Program guidelines. I understand any reimbursement I receive after completing a course(s) and submitting the necessary paperwork to the HR department will be based on the grade(s) I receive.

Employee Signature Date

Direct Supervisor Signature Date

Appointing Authority/Elected Official Signature Date



TUITION REIMBURSEMENT ACKNOWLEDGEMENT

Employees must read and sign this form in order to be considered for tuition reimbursement assistance.

I, _____, hereby acknowledge and agree that I am eligible to participate in the Larimer County Tuition Reimbursement Program. I understand that in order to be reimbursed by Larimer County, I must complete the following steps:

1. Pay the school directly for the course(s) at the time of registration.
2. Complete the specified course(s) with a passing grade (A, B or C or a passing score on courses that are pass/fail only) to receive any reimbursement assistance.
3. Upon completion of the course, provide the Human Resources Department with proof of course(s) completion, proof of grade and proof of payment. Send these items via email to humanresources@co.larimer.co.us.

After receipt of required documents and approval from HR., the reimbursement payment will be issued pre-taxed on a pay check within 45 business days.

In addition, I understand that if I separate employment with Larimer County prior to the completion of an approved course(s), the tuition reimbursement pre-approval shall be rescinded. I further understand that in the event I leave employment with Larimer County within 12 months of completing a course, I may be required to reimburse Larimer County for the tuition reimbursement that I received within the previous 12-month period. I authorize the deduction from my final paycheck of any amount of tuition reimbursement owed to Larimer County pursuant to this agreement.

I further certify the funds I request for reimbursement are not paid from other sources, such as stipends, grants, scholarships or GI Bill funds.

Employee Signature

Date