

PLAZA MEDICAL CENTER OF FORT WORTH

MANUAL: HUMAN RESOURCES	POLICY #: 1125
SUBJECT: TUITION REIMBURSEMENT	PAGE: 1 OF: 5
FUNCTION: LEADERSHIP	DIV
APPROVED BY: NAME: _____ TITLE: VICE PRES., HUMAN RESOURCES DATE _____	EFFECTIVE DATE: 06/96
APPROVED BY: NAME: _____ TITLE: CHIEF EXECUTIVE OFFICER DATE _____	REVISED DATE: 04/99, 02/04, 12/04, 04/06

POLICY STATEMENT:

Employees seeking education for the purpose of improving their skills related to their current position and/or advancement within the Company may be reimbursed for some expenses incurred while participating in an approved course of study.

PURPOSE:

To encourage and aid employees in self-development for the purpose of improving skills related to their current position and/or advancement within the company.

PROCEDURE:

1. ELIGIBILITY

- 1.1 Full-time (64 to 80 hours per pay period)
- 1.2 Part-time (40 to 63 hours per pay period)
- 1.3 PRN (1664 hours per year)
- 1.4 One year service with the Company
- 1.5 Good standing with the facility
- 1.6 Application must be submitted and approved two weeks prior to the first day of class
- 1.7 Application must be approved by the Vice President of Human Resources
- 1.8 Employee must discuss and sign plans for classes and scheduling needs with their manager

2. EDUCATION CRITERIA

- 2.1 Classes may be taken at any accredited school, college, or university.
- 2.2 Course of study must lead to a degree, professional certification, certificate of completion or state license, or for the purpose of increasing proficiency in the employee's present position or future position in health care which will benefit the facility or Company.
- 2.3 A degree plan must be submitted to Human Resources by the beginning of the second semester if continued reimbursement is desired.

3. REIMBURSEMENT

- 3.1 Reimbursement is available only for courses which have received prior approval; retroactive approval of courses shall not be allowed.
- 3.2 Funds available for tuition reimbursement are subject to budgetary restraints and may be revised as needed.
- 3.3 Maximum reimbursement per calendar year:
 - Full-Time: \$ 10,000
 - Part-Time: \$ 5,000
 - PRN: \$ 5,000
- 3.4 Maximum tuition reimbursement paid to an individual employee seeking undergraduate degree:
 - Full-Time: \$20,000
 - Part-Time: \$10,000
 - PRN: \$10,000
- 3.5 Maximum tuition reimbursement paid to an individual employee seeking graduate level degree:
 - Full-Time: \$20,000
 - Part-Time: \$10,000
 - PRN: \$10,000
- 3.6 All applicable mandatory tuition, books, and fees are reimbursable under this policy. Other school fees are not covered; e.g., parking, activity, graduation.
- 3.7 Employees must report scholarships, grants, or other funds on the application; failure to do so may result in loss of reimbursement and disciplinary action up to and including involuntary termination.
- 3.8 When scholarships, grants, etc. have been approved, tuition reimbursement will be coordinated with other funds to prevent benefits from exceeding total expenses.
- 3.9 Upon successful completion of the course(s), all original bills and a final grade report must be submitted to Human Resources within thirty (30) days for reimbursement. Bills received after thirty (30) days will not be paid.
- 3.10 Reimbursement must be paid through the payroll system so that applicable IRS regulations will be followed.

4. GRADES

- 4.1 Reimbursement for courses will be 100% for courses passed and 0% for courses failed.
- 4.2 Grades A through C shall be reimbursed at 100%.
- 4.3 Grades D or below do not qualify for reimbursement.

5. PROCEDURES

- 5.1 Employee completes tuition reimbursement application and submits to Human Resources two weeks prior to the date the course begins.
- 5.2 Human Resources reviews request to ensure compliance with policy and notifies employee via application form.
- 5.3 In the event of denial, employees have one week to file a written appeal with the Vice President of Human Resources. The Human Resources V.P. shall submit their recommendation to the senior administrative team, who will render the final decision. The employee shall be notified of the appeal result as soon as possible.
- 5.4 Employee has thirty (30) days to submit required information to Human Resources (see 3.9 above).

TUITION REIMBURSEMENT APPLICATION FORM

INSTRUCTIONS:

1. **Complete Section I of this form (attach degree plan if beginning second semester and have not previously submitted).**
2. Submit to Human Resources two weeks before class begins.
3. Discuss schedule with your manager if necessary.
4. Human Resources will send notice of approval/denial of application.
5. Save original receipts.
6. When grade report received, take with original receipts to Human Resources within 30 days of completion of course.

SECTION I

Employee Name: _____ Social Security No.: _____

Department: _____ Position: _____

Status: Full-Time Part-Time PRN Date of Hire: _____

Course(s) applied to _____ Degree or Certification

Semester: Spring Summer Fall Winter Other: _____

Degree: Associate Bachelors Graduate Other (explain): _____

School: _____ Course Nos.: _____

Beginning Date: _____ Ending Date: _____ Estimated Tuition: \$ _____

SECTION II

I am ___ am not ___ receiving veteran or other educational assistance from any other source. If so, state source, amount, and duration of benefits: _____

I am aware of the Tuition Reimbursement Policy and agree to its provisions. I acknowledge my responsibility to submit this request and my final grades according to the policy and understand that reimbursement will be denied if I fail to do so. I understand that I am responsible for reporting scholarships, grants, or other funds and give my consent for the above institution to report all financial aid to verify my statements. I understand that if I fail to report other financial aid it will result in loss of reimbursement and disciplinary action up to and including involuntary termination.

Employee Signature: _____ Date: _____

Approved/Department Director: _____ Date: _____

SECTION III (to be completed by Human Resources and Payroll)

Approved Denied

Comments: _____

Date Employee Notified of Approval or Denial: _____

V.P., Human Resources: _____ Date: _____

Grade: _____ Receipts: _____ Date Forwarded to Payroll for Payment: _____

Human Resources: _____

Processed for Payroll PPE: _____ Amount: \$ _____

Payroll Assistant: _____