CITY OF NEWTON
TUITION ASSISTANCE PROGRAM APPLICATION

NAME: _____ POSITION_____

DIVISION_____ DEPARTMENT_____

EDUCATIONAL BACKGROUND

_____ _____
Highest Grade Completed School or Institution Last Attended

_____ _____
Major Subject Degree, Certificate, or Number of Semester/ Quarter Hours

I hereby submit the following course(s) for approval under the rules of the Tuition Assistance program.

_____
Name of School or Institution

Course Title	Credits	Begins	Ends	Reg. Fees	Tuition	Other Fees
			TOTAL			

I am working toward _____ Credit only _____ Certificate _____ Degree

In the area of _____.

State briefly why you believe the course(s) will help you in your present job or prepare you for greater responsibilities with the City of Newton.

I understand that if my application is approved, the City of Newton will reimburse me for certain expenses as defined in the City's Tuition Assistance Program Policy, subject to the availability of funds. I further understand that I must complete the course(s) and provide certification that my grades meet the eligibility requirement(s) for reimbursement.

Requested: _____ _____
                         Applicant's Signature   Date

Approvals: _____ _____
                         Department Head   Date

                         _____ _____
                         Human Resources   Date

                         _____ _____
                         City Manager   Date

INSTRUCTIONS FOR APPLICANT:

1. Submit 2 copies of the completed application to the Department Head.

2. Discuss coursework with your Department Head. If possible, elective courses for degree programs should also be job related.

3. The Department Head will send copies of the application to Human Resources.

4. Notice of approval will be given to the employee by Human Resources through a signed copy of the application and a copy of the Reimbursement Request.

5. After the course(s) has been successfully completed, the employee is responsible for completing the Reimbursement Request along with proper documentation to his/her Department Head.