

Employee Educational Assistance Program
Request for Authorization to Reimburse Employee's Fee/Tuition
 (GAPP 25, Faculty/Academic Staff/Limited Appointees Handbook, section 3.24, various union contracts)

Employee Name		Classification/Title	
Employee ID# (can be found on Stout ID card)		Employing Department	
Check one: <input type="checkbox"/> Faculty <input type="checkbox"/> Academic Staff <input type="checkbox"/> Nonrepresented Classified <input type="checkbox"/> Represented Classified--Bargaining Unit: WSEU <input type="checkbox"/> WPEC <input type="checkbox"/> Science <input type="checkbox"/> WLEA <input type="checkbox"/>			
Proposed course (number, title, location)		Credits	Planned degree and date of completion
Course begin date: _____	Proposed course is: <input type="checkbox"/> Job Related <input type="checkbox"/> Career Related Undergraduate <input type="checkbox"/> Career Related Graduate	Costs associated with the course: a. Fee/Instruction Cost _____ b. Segregated Fee _____ TOTAL _____	
Course end date: _____			
NOTICE: Due to frequent changes in tax laws regarding tuition reimbursements, the most recent IRS regulations should be consulted regarding potential tax liability.			
1. How does the proposed course of study relate to the employee's current job assignment/position duties? (attach response) 2. How will the course provide knowledge/techniques to improve employee's performance? (attach response) 3. UW-Stout, Regent Policy Document 20-4, and UW System Policy G25 permit tuition/fee reimbursement to unclassified employees for authorized job-related coursework and training to improve employee job performance. An unclassified employee who receives tuition/fee reimbursement from UW-Stout shall agree to remain employed at UW-Stout for at least two years following completion of the required coursework or may be required to repay UW-Stout in full for the tuition/fees reimbursed by the university. 4. Check here <input type="checkbox"/> if this course is part of a Master's degree program required as part of the employee's contract. 5. Check here <input type="checkbox"/> if this course is part of a Doctoral degree program required for tenure.			
I have read 1 – 5, responded to questions 1 and 2, and agree to the terms of this <i>Request for Authorization to Reimburse Employee's Fee/Tuition</i> :			
Applicant's signature and date: _____			
To be completed by budget administrator:			
Account Code:		Amount:	Percent of Reimbursement:
<u>Signatures confirm that supporting documentation was reviewed and reimbursement is recommended unless otherwise indicated:</u>			
Supervisor:	Date	If disapproved, state reason(s):	
Dean:	Date		
Division Administrator:	Date		
Human Resources:	Date		