

Employee Education Assistance Request Rev 10.4.23 | maw

Employee Information					
Employee Name:					
Department:			Bates ID:		
Date of Request:			Date of Hire:		
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I am requesting education assistance for a/n:					
 ■ Job Specific Course (paid at 100%)- A single undergraduate or graduate level or non-credit course or class OR specifically determined to be essential to the employee's present job and taken at the supervisor's specific request, at another educational institution or training location. (Please attach a course description.) The job specific course benefit applies to tuition and related fees, including required texts. Determination of job specificity may be done in conjunction with an employee's supervisor. The final decision regarding job specificity lies with Human Resources. ■ Elective Course (paid at 50%) - Undergraduate, graduate, or non-credit class or course related to the employee's potential development, taken at another institution at the employee's initiative. The elective course educational assistance benefit applies to tuition expenses only. The student is responsible for payment of any related fees, in addition to any non-covered tuition expenses. 					
Course Information					
Course Title:					
Education Provider:					
Course Start Date:		Cou	Course End Date:		
Cost*:					
 Please review the following terms and conditions and sign indicating that you understand and agree: I understand that Bates College will pay funds awarded to the educational institution directly and that I must provide a bill to be paid upon receipt from the educational institution. If I withdraw from a class and am eligible for a full or partial refund, I will ensure that funds are returned to Bates College upon withdrawal. I will provide proof of completion and statement of grade upon completion of a course. I understand that if this is an elective course, I am responsible for repayment of funds awarded if I do not complete the course and secure a grade of C or better (if a grade is assigned). 					
Employee's Signature:			D	ate:	
Supervisor's Signature: (for 100% only)			D	ate:	