

MICHIGAN STATE UNIVERSITY
HUMAN RESOURCES

**EDUCATIONAL ASSISTANCE PROGRAM
APPLICATION**

(Also used for Academic Specialist Professional Development Support Program)

GENERAL INSTRUCTIONS

NOTE: For terms and conditions specific to your employee group refer to your collective bargaining contract or the Academic Specialist Professional Development Support Program description.

MSU TUITION WAIVER

(Not applicable for 324 employees – follow reimbursement instructions below)

- Submit the original completed Educational Assistance Application, *with department authorization*, to Human Resources 30 days prior to Fees and Scholarships enrollment billing date (deadlines are published quarterly in *Source*).
- Notification will be sent to the employee, within 15 days of Human Resource's receipt of the application, indicating if the course was approved or denied.
- If proof of successful course completion (2.0 or better) is not received from the Registrars Office or if tuition waiver is used for a course that is not pre-approved by Human Resources, the amount of tuition waiver may be deducted from the employee's payroll check.

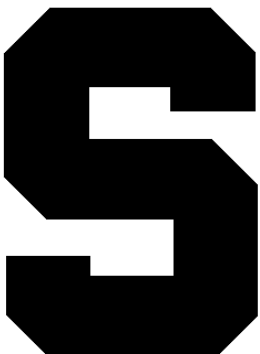
TUITION REIMBURSEMENT OR NON-CREDIT COURSE

- Submit the original completed Educational Assistance Application, *with department authorization*, to Human Resources 30 days prior to the first day of class.
- Notification will be sent to the employee, within 15 days of Human Resource's receipt of the application, indicating if the course was approved or denied.
- Reimbursement of *Human Resources pre-approved courses only* is processed when the employee provides proof of successful course completion (see below) *and proof of course cost*.
 - Credit Course: a copy of the grade report indicating a grade of 2.0 or better
 - Non-Credit Course: a copy of a course certificate signed by the course instructor or a completed Non-Credit Course Certification of Successful Completion Form provided by Human Resources.

WHO TO CONTACT WITH QUESTIONS

Michigan State University
Human Resources
Nisbet Building
1407 S Harrison Rd Ste 110
East Lansing MI 48823-5239

Open Monday through Friday
8:00 a.m. - 5:00 p.m. (INCLUDING THE LUNCH HOUR)
(517) 884-0177
FAX: (517) 884-8033



(Revised 2/11/2014)

MSU is an affirmative-action/equal opportunity employer.

INSTRUCTIONS FOR COMPLETING THE APPLICATION

EMPLOYEE: NOTE: If submitting more than one application, each form requires department authorization.

NAME: Last name first; <i>please print.</i>	z-pid
WORK ADDRESS : Work site	WORK TELEPHONE: Work site telephone number

Check the semester or term and write the appropriate year for each course in the space provided.	TUITION WAIVER: Only MSU credit courses are eligible. REIMBURSEMENT: Check appropriate box.
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SPACE FOR ADDITIONAL COURSES AT END OF APPLICATION

INSTITUTION NAME	Name of institution where course is offered.
COURSE TITLE	Course name
COURSE ID	Alpha code (i.e., French class might be "FRN") and number identifying course. <i>BE SPECIFIC</i>
COURSE TYPE	Credit: Check only if there will be <i>earned credits</i> upon course completion. Indicate the number of <i>earned credits</i> . Audited or visited classes are not eligible. Non-Credit: Check only if there will be <i>no</i> earned credits upon course completion.
FEE PER CREDIT	Amount paid for one credit. Does not include other course fees. Non-Credit = N/A
TOTAL COURSE COST	Amount paid for requested credits. Non-Credit = Total cost of course/seminar For Academic Specialists list total amount for tuition, do not include course/program fees.
COURSE LEVEL	Graduate or Undergraduate. Non-Credit = N/A
JOB RELATED	A course directly related to the field of current job assignment.
DEGREE RELATED	A course required in a degree program. <i>Indicate the type of degree (i.e., B.A., Ph.D., etc.)</i>
PROFESSIONAL/CAREER RELATED	A course relating to a more responsible, higher level <i>MSU position</i> .

RELEASE TIME: Time requested to attend class. Supervisor approval is required. See specific collective bargaining agreements and/or Educational Assistance Program brochure or the Academic Specialist Handbook.

****Statement of Benefit (for Academic Specialists only): Attach a statement that indicates the importance/relevance of the course to the unit and to the Academic Specialist.****

READ THE "CONDITIONS OF EMPLOYEE SIGNATURE" AT THE END OF THE FORM BEFORE SIGNING THE APPLICATION.

SUPERVISOR/DEPARTMENT ADMINISTRATOR:

RECOMMENDED: After review of course information on the application, check YES or NO. If the course is not recommended by the supervisor/department administrator, it will not be approved by Human Resources.
JOB RELATED: After review of course information on the application, check YES or NO.
RELEASE TIME APPROVAL: After review of release time hours on the application, check YES or NO.
SIGNATURE: The application will not be accepted without supervisor/department administrator signature.

SEND ORIGINAL APPLICATION TO HUMAN RESOURCES.

MICHIGAN STATE UNIVERSITY EDUCATIONAL ASSISTANCE APPLICATION & ACADEMIC SPECIALIST PROFESSIONAL DEVELOPMENT SUPPORT PROGRAM APPLICATION

NAME:	Z-PID #:
WORK ADDRESS:	WORK TELEPHONE #:
Academic Specialist: ___ Fixed Term ___ Continuing System	EMPLOYEE GROUP :

<input type="checkbox"/> FALL 20____	<input type="checkbox"/> SPRING 20____	<input type="checkbox"/> MSU TUITION WAIVER	<input type="checkbox"/> INITIAL APPLICATION
<input type="checkbox"/> WINTER 20____	<input type="checkbox"/> SUMMER 20____	<input type="checkbox"/> REIMBURSEMENT	<input type="checkbox"/> ADDITIONAL COURSES
<input type="checkbox"/> SEMESTER	<input type="checkbox"/> TERM	<input type="checkbox"/> NON-MSU CREDIT	<input type="checkbox"/> CORRECTION
		<input type="checkbox"/> NON-CREDIT	
		<input type="checkbox"/> MSU CREDIT (547 ONLY)	

USE LAST PAGE OF FORM FOR ADDITIONAL COURSES	<i>FIRST COURSE</i>	<i>SECOND COURSE</i>
INSTITUTION NAME		
COURSE TITLE		
COURSE ID	(ALPHA CODE) _____ (NUMBER) _____	(ALPHA CODE) _____ (NUMBER) _____
COURSE TYPE	<input type="checkbox"/> CREDIT, # <input type="checkbox"/> NON-CREDIT	<input type="checkbox"/> CREDIT, # <input type="checkbox"/> NON-CREDIT
FEE PER CREDIT		
TOTAL COURSE COST		
COURSE LEVEL	<input type="checkbox"/> GRADUATE <input type="checkbox"/> UNDERGRADUATE	<input type="checkbox"/> GRADUATE <input type="checkbox"/> UNDERGRADUATE
JOB RELATED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
DEGREE RELATED?	<input type="checkbox"/> YES, Type? <input type="checkbox"/> NO	<input type="checkbox"/> YES, Type? <input type="checkbox"/> NO
PROFESSIONAL and/or CAREER RELATED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

Release time requested	MON:	TUES:	WED:	THURS:	FRI:	SAT:	<u>TOTAL:</u>
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I request approval for tuition waiver or reimbursement as shown above. I have read and fully understand the *CONDITIONS OF EMPLOYEE SIGNATURE* at the end of this form. I certify the above information is true and accurate.

Employee Signature _____ **Date** _____

For Supervisor and/or Department Administrator	RECOMMENDED?	JOB-RELATED?	RELEASE TIME APPROVED?
FIRST COURSE	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
SECOND COURSE	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
ADDITIONAL COURSES (See back)	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

Supervisor and/or Department Administrator Signature _____ **Date** _____

CONDITIONS OF EMPLOYEE SIGNATURE

By signing this form I understand and agree to the following:

1. I am authorizing the Registrar's office and the Fees and Scholarships office to release my record of course work, grades and other tuition-specific awards to Human Resources for determination of eligibility for Educational Assistance or the Academic Specialist Professional Development Support Program.
2. I am authorizing the amount of tuition waiver to be deducted from my payroll check *IF* tuition waiver is granted and I do not successfully complete the course(s) (with a 2.0 or better grade) described on this form (or as amended), or if the waiver is used for other than an approved course.
3. I understand that there is a \$5,250.00 maximum limit for tax exemption for educational assistance/specialist professional development courses taken either through tuition waiver or reimbursement, that any amount that exceeds the \$5,250.00 exclusion is taxable as income and may result in tax withholding from my paycheck.
4. I understand that final approval by the employer (MSU) is contingent on recommendation by my supervisor and/or department/unit administrator with authorization by Human Resources.
5. I understand that if a course described on this form is not approved by Human Resources, that the course is NOT eligible for tuition waiver or reimbursement through the Educational Assistance Program or the Academic Specialist Professional Development Support Program.

	<i>ADDITIONAL COURSE</i>	<i>ADDITIONAL COURSE</i>
INSTITUTION NAME		
COURSE TITLE		
COURSE ID	(ALPHA CODE) ____/____/____/____ (NUMBER) ____/____/____/____	(ALPHA CODE) ____/____/____/____ (NUMBER) ____/____/____/____
COURSE TYPE	<input type="checkbox"/> CREDIT, # <input type="checkbox"/> NON-CREDIT	<input type="checkbox"/> CREDIT, # <input type="checkbox"/> NON-CREDIT
FEE PER CREDIT		
TOTAL COURSE COST		
COURSE LEVEL	<input type="checkbox"/> GRADUATE <input type="checkbox"/> UNDERGRADUATE	<input type="checkbox"/> GRADUATE <input type="checkbox"/> UNDERGRADUATE
JOB RELATED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
DEGREE RELATED?	<input type="checkbox"/> YES, Type? <input type="checkbox"/> NO	<input type="checkbox"/> YES, Type? <input type="checkbox"/> NO
PROFESSIONAL and/or CAREER RELATED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

Academic Specialists

Applications are accepted on a continuous basis as long as funds are available. They will be reviewed in the order in which they were received.

**SEND ORIGINAL APPLICATION TO HUMAN RESOURCES, ROOM 110 NISBET BUILDING OR
FAX TO (517) 884-8033**