

UNC CHARLOTTE APPLICATION FOR TUITION REIMBURSEMENT

UNC Charlotte's Tuition Reimbursement Program (also known as "Academic Assistance") is supported by the [NC Office of Human Resources Academic Assistance program](#). For UNC Charlotte policy, process, and procedural information, click [here](#). The Academic Assistance Program is not an employee benefit, right or entitlement. It is a management program for workforce development and planning. Therefore, courses should be related to current job responsibilities or to the development of future skills/competencies for future use within the agency. Reimbursement includes tuition and other academic-related fees. (Dormitory, student union, athletic fees, student health service, cultural event fees, etc. are not reimbursable under this program.) Agencies and universities will make the final decision on the dollar amount that will be reimbursed. Reimbursement for courses taken at academic institutions outside the UNC system should not exceed the established academic assistance ceiling rates. Courses must be taken during your personal time, unless the courses are not available after working hours.

Instructions for the employee/student:

1. Carefully review the information above and discuss the course(s) in which you wish to enroll, with your supervisor, to determine eligibility and obtain budget approval for reimbursement.
2. Complete Sections 1 - 3 **prior** to attending the course.
3. Within 30 days of completing the course(s):
 - a. complete the [Employee & Student Direct Pay Request \(ESDPR\)](#),
 - b. gather receipts and course grades,
 - c. scan receipts and course grades and all three pages of this form to create a single PDF document, and
 - d. scan all documents into the [Imaging Document Submission eForm](#).

SECTION 1: EMPLOYEE INFORMATION				
Last Name	First Name	Home Street Address	State	Zip Code
Employee ID	Email address @charlotte.edu	Work Phone 704-687-	Your Manager's Name	
Division Name	Department Name	Your Position/Title	Yes	No
Full Time	Part Time	Probationary	Are you a permanent status employee?	
<i>Select your Employment Status from the options above.</i>				
SECTION 2: COURSE INFORMATION				
A/AS	BA/BS	MA/MS	Ph.D/Ed.D.	Other
<i>Select your degree program from the options above.</i>				
Major Field of Study	Certification	Licensure	Other	
<i>Enter the relevant course title in one of the fields above.</i>				
Name of Accredited Educational or Certifying Institution		Street Address	State	Zip Code
Course 1				
Course Number	Course Title	Credit Hours	Yes	No
			Does this course relate to current or future job skill needs?	
Course Delivery	Start Date	End Date	Start Time	End Time
Course Cost	Fees	Specify Fees	Total Cost	
Type of Course:				
Course 2				

			Yes	No
Course Number	Course Title	Credit Hours	Does this course relate to current or future job skill needs?	
Course Delivery	Start Date	End Date	Start Time	End Time
Course Cost	Fees	Specify Fees	Total Cost	
Type of Course:				
Course 3				
			Yes	No
Course Number	Course Title	Credit Hours	Does this course relate to current or future job skill needs?	
Course Delivery	Start Date	End Date	Start Time	End Time
Course Cost	Fees	Specify Fees	Total Cost	
Type of Course:				
SECTION 3: APPROVALS				
Employee Approval				
Are you eligible and registered for Selective Service (NCGS 143B-421.1)?			Yes	No
<p>My signature below certifies that the above is true to the best of my knowledge. I understand that reimbursement is conditional upon satisfactory course completion, availability of funds and that reimbursement may be subject to withholding and FICA taxes. I, hereby, will release my course attendance and grade records for all courses I am seeking reimbursement. All receipts and any other necessary documentation have been attached to show proof of payment for courses. I understand that cancelled checks are not acceptable as a receipt for course payment.</p>				
Employee Signature			Date	
Manager Approval				
Number of courses approved	Amount to be reimbursed	Account Number	Funding Code	
<p>My signature below certifies the above information and all attached documentation have been reviewed, verified and are in compliance with the Academic Assistance Policy and procedures. I confirm that the course(s) is/are related to current or future job skill needs, and expenses have been reviewed and approved, by Budget, as reimbursable academic assistance expenses according to policy.</p>				
Manager Signature		Title	Date	