KEAN

TUITION REIMBURSEMENT APPLICATION FOR UNCLASSIFIED (AFT) & MANAGERIAL EMPLOYEES

Employee's Name _____ Employee's ID# _____

Department _____ Extension _____

Location _____ Email _____@kean.edu

Indicate the accredited institution you plan to attend. _____

Select the category that pertains to you.

❑ Unclassified Employee (AFT) ❑ Managerial Employee

Select your degree program and provide the title.

❑ Undergraduate Degree Title of Degree Program _____

❑ Graduate Degree Title of Degree Program _____

Select the term for which you are seeking tuition reimbursement and indicate the year.

❑ Fall Semester _____ ❑ Spring Semester _____

❑ Summer Session I _____ ❑ Summer Session II _____

Course(s)	Credit(s)	Course Schedule(s)

My signature confirms that I have read, do fully understand and agree to adhere to the conditions for Tuition Reimbursement that are outlined within the Tuition Reimbursement Policy for Unclassified and Managerial Employees.

Employee's Signature _____ Date Signed _____

The signatures of the Supervisor and Department Head confirm that there is no conflict between the course schedule(s) listed above and the employee's normal work hours. Accordingly, they are recommending tuition reimbursement be granted.

Supervisor's Signature _____ Date Signed _____

Department Head's Signature _____ Date Signed _____

Recommendation of Human Resources Director _____

❑ Approved

Signature of Chief Financial Officer _____

❑ Disapproved

COMPLETED APPLICATIONS SHOULD BE RETURNED TO THE OFFICE OF HUMAN RESOURCES, 2ND FLOOR – ADMINISTRATION BUILDING