



APPLICATION FOR EDUCATIONAL BENEFITS FOR FULL TIME EMPLOYEE - CLASS A

Employee Information:

Name: _____

Datetel ID #: _____

Job Title: _____

Department/Division: _____

Please mark all Educational Benefits being requested:

Tuition Reimbursement and amount requested \$_____.

Flexible Scheduling (requires pre-approval of supervisor), please explain how your normal work schedule would be adapted: _____

Please check all degrees / certifications previously earned:

Associates Bachelors Masters Doctorate Certifications

Please check degree being pursued:

Associates Bachelors Masters Doctorate Certifications

Course Title and Number: _____ Credit Hours: _____

Institution: _____ Semester Attending: _____

Justification: For the pursuit of a Bachelor's, Master's or a Doctoral degree, educational benefits may be requested only if the degree is commensurate with the position or career path held by the employee. Please attach supporting documentation and any comments to explain how this degree plan corresponds to your position or career path.

Are you receiving other financial support for tuition such as grants or other scholarships and if so please explain?

Attach a copy of the proposed program/degree plan to the application and highlight course being taken for EB.

I understand this is a benefit provided to me by Navarro College, and I agree to abide by the conditions according to the Employee's Educational Benefits Policy of the "Navarro College Administrative Policies and Procedures Manual."

Employee Signature: _____ Date: _____

Immediate Supervisor Approval*: _____ Date: _____

Administrative Officer Approval*: _____ Date: _____

Recommended for approval by Benefits Coordinator*: YES NO _____

FINAL APPROVAL*

District President: _____ Date: _____

*All approvals are contingent upon the availability of funds budgeted for Educational Benefits.