

Volunteer State Community College Tennessee Board of Regents Faculty/Administrative/Professional Staff Tuition or Maintenance Fee Reimbursement Program Recommendation/Contract Form

This program is designed to provide maintenance or tuition-related fees only for an individual who takes credit courses on a part-time basis — either at his or her own or at another institution — while continuing work responsibilities at Volunteer State Community College.

To Be Complete	d by the Employee						
Employee Name:							
Employee ID:		_					
Department/Divis	sion:		Account #				
Current Degree S	tatus:(Deg	ree and Area)	(Additi	onal hours beyond degree)			
To be complete	ed by the Supervi	sor:					
	yee a regular full-t unteer State Commu			nistrative/professional staff	f member who has been		
☐ Yes	□No	Date of Hire					
Community Colle	ege as defined below Support for person we Support for person p	w: (Check approportions) Working toward the ursuing a degree	priate purposes)? The doctorate or other below the doctorate.	ate in a technical or profess	sional description.		
	College. ther (Explain)		· ·	expertise needed by Volun	teer State Community		
-	ed by the Employ of tuition or mainten						
		of proposed study of proposed study					
c) (Course(s) Name	Course #	Credit Hrs.	Maintenance Fee/ Tuition	n		
_							
_							
_							
- Т	Total Reimbursemer	nt Requested:			<u> </u>		

	per term. Employees will normally be eli	aintenance or tuition-related fees for a may gible for one course per term, with a maxi- ne course during the summer as long as the	mum of 4 terms per year.
4. In reque (below)?	esting support for tuition or maintenance fee	es reimbursement, do you agree with the st	ipulations listed in a-d
employ	No a. The recipient, unless retired, yed by Volunteer State Community College of the term of participation in the Facum.	e for not less than one (1) month of full-ti	ime employment for each
	☐ No b. Satisfactory completion of of eligible for additional assistance. Voluntee edue.		
job per	☐ No c. Courses should be scheduled annual leave or flextime, based on the needs	at times other than during regularly sche	
	☐ No d. It is recommended that compus. It is further recommended that each for the course(s) taken.	mplete materials supporting the individual recipient be required to provide the presi	
5. If the red	cipient should receive a student scholarship,	, he/she will notify the Human Resources O	Office immediately.
Signature _		Date	
Approval	Recommendation		
Immediate	e Supervisor:	Date	
Vice-Pres	ident:	Date	
Vice Pres	sident for Human Resources:	Date	
President	 :	Date	
Employ	ment Certification		
Date of f	full-time employment:	_	

Approved TBR Rate for current year _____: