## 2005-2006 Employee

**Educational Benefits Request Form**

*See Reverse Side for Instructions - Incomplete Information Will Delay the Process*

### APPLICANT INFORMATION: *(Please print or type)*

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date of Application:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soc. Sec. #:</td>
<td>Campus Employed:</td>
</tr>
<tr>
<td>Department</td>
<td>Position:</td>
</tr>
</tbody>
</table>

### EMPLOYMENT STATUS:

**Employee is:** Check all that apply

- [ ] Administrative Staff
- [ ] Classified (Non-Bargaining)
- [ ] Classified (Bargaining Unit)
- [ ] Faculty

- [ ] Full Time
- [ ] Part Time
- [ ] Contract Group II FTE
- [ ] Retired
- [ ] Approved Leave

### ENROLLMENT INFORMATION:

<table>
<thead>
<tr>
<th>Quarter Enrolled:</th>
<th>Campus Enrolled:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduate</td>
<td>Undergraduate</td>
</tr>
<tr>
<td>Ohio Resident:</td>
<td></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Course Title(s)</th>
<th>Meeting Time/Days</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
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</table>

Total Hours: ____________________

Employee’s Signature: ____________________

### THIS SECTION IS TO BE COMPLETED BY THE Department Head/ Budget Unit Manager

The above employee is required to make up time away from the job:  
[ ] Yes  [ ] No

The above employee is granted permission to be a full-time student:  
[ ] Yes  [ ] No

The coursework is a requirement of the employee's position and in addition to the applicable instructional fees (which are covered by the University) the general fees should be charged to the departmental account number listed below.

*If "YES" provide an explanation (in the space below) of how this coursework relates to the minimum education, training, experience or skill required for this employee's position and the department account number to be billed for the general fee:

Department Account Number: ____________________

Fund Type: Fund: Organization: Natural Account: Project: ____________________

Department Head/Budget Unit Manager Signature: ____________________
Instructions for completing the Employee Educational Benefits Request Form:

1) Complete top section of form thoroughly, incomplete information will delay the process.

2) Receive approval from Department Head or Budget Unit Manager by having them complete the bottom section of the form.
   * The first three questions pertain to all employees & must be checked yes or no & a signature must be provided.

Submit the request form through campus mail to: Educational Benefits, UHR, Human Resources & Training Center.
Turn this form in as early as possible, preferably during the pre-registration period of the quarter you plan to attend. If you do not pre-register please return the form to us as soon as you register. Early receipt of the form can ensure correct billing. If you receive a bill for the incorrect amount you may contact our office to find out the amount of educational benefits that was applied to your account. It is your responsibility to have any amount owed paid by the due date printed on your bill. Failure to do so could result in the cancellation of your registration or you could be charged a $100 late fee. As a student taking classes it is your responsibility to pay or waive the Student Advocacy Center Fee and the Health Insurance Fee. To waive these fees complete the appropriate sections on your tuition bill or request waiver cards at the Bursar's Window in Chubb Hall.

If you are taking a course through Independent & Distance Learning or being billed by the Without Boundaries Department please make note of this & include a copy of your bill with the request form.

Information Regarding the Educational Benefits Program

Full-time Permanent & Provisional Classified Employees and Full-time Faculty and Administrators receive Educational Benefits for the instructional fees & non-residency fees (when applicable).

Part-time Permanent & Provisional Classified Employees are eligible for 50% of the instructional fees waived and 50% of the non-residency fees (when applicable) waived.

Part-time, benefit-eligible Faculty & Administrators receive pro-rated benefits based on their Full-Time-Equivalency (FTE). Complete (100%) waivers are subject to the approval of your supervisor or appropriate department head.

Complete tuition waivers are granted for coursework that is a requirement of the employee's current position. Required course work would be that which is related to the minimum education, training, experience or skill required for the employee's position. Individual department budgets will be charged for the general fee portion of complete waivers. Educational benefits forms must be completed on a quarterly basis. Please review Policy 40.015 or call the number listed below for any questions.

Employees are permitted to take up to ten undergraduate hours or eight graduate hours per quarter.

Full-time employees wishing to take more than this need permission from the employees' supervisor.

Special Course Fees, Technology Fees, Lab Fees, OPIE courses and fees for audited courses are not covered under the Educational Benefits Program. Currently there are three graduate programs that have higher fees than that of a regular graduate program. (The College of Osteopathic Medicine, The Executive MBA Program, MBA Without Boundaries Program & Masters of Athletics Administration). Participants in these programs should be aware that their Educational Benefits would be limited to that of a regular graduate program. If you have specific questions regarding the amounts covered for these programs contact UHR.

To verify the application of credit to your account use the Ohio University Student Account Statement On-Line at:
www.finance.ohiou.edu/bursar.html
(you will need your Student PID and 4 digit RAC to access this system)

Please Return this form and direct questions to:
Educational Benefits, University Human Resources, Human Resources & Training Center   (740) 593-1636