

**FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT  
TRAINING/RETRAINING REIMBURSEMENT FORM**

The District shall maintain a fund for assisting unit members to pay for required tuition, fees, and textbooks to attend any work-related class at an accredited college or university. The fund shall be \$30,000 per year. Remaining money shall be rolled over to the next year but the maximum fund shall be not more than \$40,000. Training/retraining reimbursement may be used during a Staff Development Leave.

1. The worker shall provide evidence of successfully completing the class.
2. A worker may receive up to a maximum of \$1,500 per academic year.
3. Assistance shall be on a first come first serve basis, until the fund is depleted.

**Include official transcript verifying successful completion of the work-related class and receipts identifying tuition, fees and textbooks. Parking fees are not included.**

**To Be Completed By The Employee:**

Employee Name	CWID
Job Title: _____	Phone: _____
Amount of Educational Assistance Requested:	Tuition:       \$ _____
Date of Course(s): _____	Fees:           \$ _____
Date Course(s) Completed: _____	Textbooks:   \$ _____
	Total:           \$ _____
Information on course(s): _____	

Employee Signature	Date
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**To Be Completed by the Administrator:**

I verify that this class is a work-related class.

Administrator's Name (please print)	Administrator's Signature	Date
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\*\*\*\*\* (For Human Resources Use Only) \*\*\*\*\*

Associate Vice Chancellor, Human Resources	Amount Reimbursed \$ _____
Processor: _____	Date of Reimbursement: _____