In accordance with Board Policy 5-120 Questar III may provide tuition reimbursement to non-represented employees who complete college level courses, subject to prior approval by Questar III. These regulations set forth criteria for approval and procedures for requesting tuition reimbursement.

Approval of Courses

1. Criteria for Approval. Tuition reimbursement is available only for credit-bearing college level courses at an accredited college or university (undergraduate and graduate). To be approved the course must:
   - Be related to the employee’s position and responsibilities at Questar III;
   - Provide opportunity for the employee’s individual growth at Questar III; and
   - Provide value to Questar III, such as through improved job performance or expanded opportunities for services.

2. Approval Process. An employee must submit a completed Request for Reimbursement form (Parts A and B) and the course description to the employee’s supervisor for initial approval and to the District Superintendent for final approval prior to enrolling in the course. The decision of the supervisor and the District Superintendent are final and are not subject to appeal or review.

3. Purchase Order. Upon approval of a request for reimbursement of tuition, the appropriate program office will establish a purchase order for the total amount of such reimbursement. Such purchase order will remain open until tuition is either fully reimbursed or eligibility for reimbursement ends in accordance with these regulations.

3. Documents to Retain. An employee should maintain a copy of the approved Request for Reimbursement form and course description and must maintain the original paid receipt for tuition as these documents will be required to complete the reimbursement process.

Reimbursement of Tuition

1. Limits on Tuition Reimbursement. Questar III will reimburse at a rate not to exceed $300 per credit hour and $5,000 per calendar year. The $5,000 calendar year limit will be calculated based upon the dates of completion of approved courses.

   For courses approved on or after January 1, 2019, employee will be eligible for reimbursement of tuition upon employee providing sufficient proof to Questar III of successful completion of such approved course no later than sixty (60) days from conclusion of such course and as follows: eligible for 50% of tuition reimbursement upon conclusion of one additional year of service with Questar III following submission and approval by Human Resources of course completion; and eligible for 50% of tuition reimbursement upon conclusion of two additional years of service...
with Questar III following submission and approval by Human Resources of course completion. Tuition reimbursement is contingent upon continued employment with Questar III. An employee will not be eligible for tuition reimbursement for such approved course if his or her employment ends prior to the date of eligibility for reimbursement.

2. Reimbursement Process.

The employee must complete Tuition Reimbursement Form Part C and submit it with the following proof of successful completion of the approved course no later than sixty (60) days from conclusion of the course to the Human Resources Department: an official grade transcript and the original paid receipt for tuition. Human Resources Department will return a copy of the approved Part C to the employee.

The employee will become eligible for reimbursement of approved tuition reimbursement amount upon expiration of one year and two years of additional employment in accordance with paragraph 1, above. Upon eligibility for payment, it is the employee’s responsibility to submit the approved Request for Reimbursement Form Part C to the employee’s program office within thirty (30) days of eligibility. Failure to submit this request for payment within the required timeframe will forfeit employee’s right to reimbursement.

The program office will note the date they received from the employee on the Request for Reimbursement Form Part C, complete the green accounts payable payment authorization form, attach a copy of the Request for Reimbursement Form Part C, and submit all documents to the Accounts Payable Department to process the payment.

January 18, 2019
REQUEST FOR TUITION REIMBURSEMENT FORM

PART A: TO BE COMPLETED BY EMPLOYEE REQUESTING REIMBURSEMENT

NAME OF EMPLOYEE: ________________________________________________
POSITION: __________________________________________________________
COURSE TITLE: _________________________________________________________

** NOTE: PLEASE ATTACH COPY OF COURSE DESCRIPTION **

NAME AND LOCATION OF EDUCATIONAL INSTITUTION WHERE COURSE IS BEING OFFERED: __________________________________________________________
START AND COMPLETION DATES OF COURSE: _____________________________
NUMBER OF CREDIT HOURS: ____________
TOTAL COST OF TUITION: ____________

DESCRIBE IN DETAIL HOW THIS COURSE IS RELATED TO YOUR PRESENT POSITION AT QUESTAR III, AND HOW THE SUCCESSFUL COMPLETION OF THIS COURSE WILL BENEFIT YOU IN YOUR CURRENT POSITION (attach additional pages if needed):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

DESCRIBE IN DETAIL HOW COMPLETION OF THIS COURSE WILL PROVIDE VALUE TO QUESTAR III – SUCH AS ENHANCING AGENCY EXPERTISE, IMPROVED SERVICES, NEW SERVICES (attach additional pages if needed):

________________________________________________________________________
________________________________________________________________________

________________________________________________________________________
PART B: TO BE COMPLETED BY EMPLOYEE’S SUPERVISOR. APPROVAL IS ALSO REQUIRED BY THE DISTRICT SUPERINTENDENT

I HAVE REVIEWED THE COURSE INFORMATION AND REQUEST FOR REIMBURSEMENT AND APPROVE _____ DISAPPROVE _____ THE REQUEST FOR TUITION REIMBURSEMENT FOR THE FOLLOWING REASONS:

________________________________________________________

________________________________________________________

________________________________________________________

SUPERVISOR SIGNATURE: _______________________________ DATE __________

DISTRICT SUPERINTENDENT SIGNATURE: ____________________ DATE___________

NOTE: EMPLOYEE MUST SUBMIT APPROVED FORM (PARTS A AND B) TO THE HUMAN RESOURCES DEPARTMENT BEFORE COURSE COMMENCES.

For Administrative Use Only

Date Part A and B Received: ______________

January 18, 2019
REQUEST FOR TUITION REIMBURSEMENT FORM

PART C: TO BE COMPLETED AND SUBMITTED TO THE HUMAN RESOURCES DEPARTMENT BY THE EMPLOYEE UPON SUCCESSFUL COMPLETION OF THE COURSE. To receive tuition reimbursement the Human Resources Department must receive Part C and required documentation of course completion no later than 60 days from the date of course completion in Part A of this form.

NAME OF EMPLOYEE: ________________________________________________

POSITION:   ________________________________________________

COURSE TITLE:  ________________________________________________

I HAVE SUCCESSFULLY COMPLETED THE COURSE INDICATED. ATTACHED IS AN OFFICIAL TRANSCRIPT FROM THE ACCREDITED EDUCATIONAL INSTITUTION AND PAID TUITION RECEIPT AS DOCUMENTATION.

SIGNATURE OF EMPLOYEE: ___________________________    DATE:  ___________

January 18, 2019

For Administrative Use Only

HUMAN RESOURCES TO COMPLETE UPON COURSE COMPLETION:

Date Part C Received: _________________
Official Transcript Received: _________________
Original Paid Tuition Receipt Received: _________________
Total Amount of Tuition to be Reimbursed upon eligibility: _____________________________

ELIGIBILITY DATE FOR PAYMENT OF 50% REIMBURSEMENT _________________

ELIGIBILITY DATE FOR PAYMENT OF REMAINING 50% REIMBURSEMENT _________________

APPROVED BY HR: _______________________ DATE: ______________

***Provide copy to employee after approved***

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EMPLOYEE REQUESTS PAYMENT ---- PROGRAM OFFICE TO COMPLETE AND TRANSMIT TO ACCOUNTS PAYABLE FOR REIMBURSEMENT TO BE PROCESSED:

DATE EMPLOYEE REQUEST RECEIVED BY PROGRAM OFFICE FOR PAYMENT PROCESSING:

1ST 50% REIMBURSEMENT: _________________

FINAL 50% REIMBURSEMENT: _________________