MONTGOMERY COUNTY
OFFICE OF HUMAN RESOURCES
Training & Organizational Development Team

BEFORE YOU SEND US YOUR TUITION ASSISTANCE APPLICATION, DID YOU . . .

√ Fill out the new and approved application form for FY 2016

√ Remember that ***course work must be taken during your off-duty hours.***

√ Check the form for accuracy and completeness?

- ☞ Did you include the correct class title/class number?
- ☞ Is the cost accurate? Only tuition is covered.
- ☞ Have you filled in all the blocks? Incomplete information may delay processing of your request.

√ Sign the form?

√ Provide itemized bill with all costs broken down to include tuition.

√ Make sure the form is signed by LFRD President and MCFRS Chief.

√ A justification explaining how the course is related to their current job or career ladder in the same job series or profession

√ Allow at least 4 weeks processing time after you send the application to the Training and Organizational Development Team in OHR. You also need to allow sufficient processing time in your department. The voucher letter we prepare for the educational institution is good for only 30 days.

√ Include a copy of your grades or certificate of completion from the previous course paid for by OHR? (This applies only to previous participants. New applicants may disregard this step).

√ Send two copies of your application to Office of Human Resources, EOB 7th floor? Photocopies are acceptable.

√ Include proof of payment if applying for a reimbursement for courses taken during this fiscal year?

√ **Familiarize** yourself with the memorandum of understanding between Montgomery County Government and MCVFRS

Familiarize yourself with the program's guidelines and your responsibilities. Program guidelines are outlined in the OHR Topics for MCVFRS.

FOR MORE INFORMATION, Call (240) 777-5116 or go to the web site **http://www.montgomerycountymd.gov** Click on Government. Then Select HR Resource Library, Training and Tuition Assistance folder respectively to view the information.

New Tuition Assistance Application
Montgomery County Volunteer Fire and Rescue Service Association

APPLICATION FOR (Check one): FALL___ WINTER___ SPRING___ SUMMER___ 200___

First Name **Middle Name** **Last Name** **Social Security #**

Home Address **Home Phone** **Cellar Phone**

Station # **Station Address** **Office Phone Number** **Fax Number**

Have you previously had tuition assistance?
Yes____ no _____

COURSE(S) REQUESTED

Course #	**Course Title**	**# of Credits**	**Tuition Cost**
____	_____	_____	$_____
____	_____	_____	$ _____

NAME OF SCHOOL _____ TOTAL EXPENSES $ _____

Complete School Address:_____

Name and Contact at School for Additional Information and Questions:_____

School Web Site:_____

Course Registration Date:_____ **Course Starting Date:**_____ **Ending Date:** _____

Time and Day of Week Course(s) Held:_____

Course(s) must be taken during off-duty hours.

EDUCATIONAL OBJECTIVE:
Please complete the one category that best describes your educational objectives:

1. **Course(s) Leading to Degree**

   DEGREE OBTAINING : CERT ☐ AA ☐ BA/BS☐ MA/MS☐ PHD ☐ Other _____

   MAJOR:_____ **ANTICIPATED GRADUATION DATE:**_____
   (Example: Business Administration)

   Please write a justification below explaining how the above degree is ***related to your present job functions or career ladder in the same job series or profession or career.*** *(If more space is needed, please attach justification)*

   _____

   _____

2. **Individual Course not leading to Degree (NON-DEGREE):**

Please write a justification below explaining how the course(s) above are ***related to your present job functions or career ladder in the same job series or profession or career.*** *(If more space is needed, please attach justification)*

TUITION ASSISTANCE PROGRAM CONDITIONS

Employees interested in participating in Montgomery County Tuition Assistance Program should carefully review the memorandum of understanding between Montgomery County Government and Montgomery County Volunteer Fire Rescue Association (MCVFRA) for detailed guidance. The following items are particularly important and should be read carefully by all participants.

1. The program exists to provide financial assistance to regular Full time/Part time employees for courses which are related to unit member's current job functions or career ladder in the same job series or profession

2. Approved Tuition Assistance funds are for **tuition only**.

3. Tuition assistance benefits are limited to the costs required to pay for tuition and up to the allowable limit for full-time and part-time employees, ***which are not being met by any other educational benefits or scholarship.***

4. Tuition Assistance **does not** cover compulsory fees such as matriculation, registration, laboratory, library, and technology fees. The program also does not cover books, supplies, or extra fees such as late registration or parking.

5. All approved course work must be held in the U.S.A.

6. Tuition Assistance Program **will not fund courses** which are primarily recreational, or utilize a specific faith based method as a primary approach to problem solving or treatment.

7. All approved tuition assistance course(s) must be **taken during employee's off-duty hours**.

8. All approved tuition assistance course work must be completed with a passing grade or certificate of completion or the employee must reimburse the county.

9. Employees are required to submit the following information along with their application for processing by the Office of Human Resources.

    - A copy of **Course Description** from the Educational Institution;
    - Itemized bill with all costs broken down to include tuition and all fees;
    - A justification explaining how the course is related to their current job or career ladder in the same job series or profession;
    - A copy of grade report or certification of completion from previous course(s) paid by the Montgomery County Government Tuition Assistance Program, if applicable; and
    - If an employee is taking annual leave or flexing his/her work schedule, the employee's supervisor and Director must indicate approval on the Tuition Assistance application.

10. As a condition of the program, employees who participate in this program agree to remain with the County for at least one year after course completion. Should they leave, voluntarily or involuntarily, the amount of money received during the twelve months prior to separation must be returned to the County.

EMPLOYEE CERTIFICATION:

I CERTIFY THAT I HAVE READ AND UNDERSTAND THE ABOVE AND THE TUITION ASSISTANCE PROGRAM POLICY AND ACCEPT ALL THE CONDITIONS FOR PARTICIPATON IN THIS PROGRAM.

Employee Signature _____ Date_____

PARTICIPANT'S INSTRUCTIONS: Submit (2) copies signed by President of MCVFRA and MCFRS Chief. Official grade notice for last course(s) completed under Tuition Assistance must be submitted as soon as it is received from the educational institution or at the time of application whichever comes first. ***It is the volunteer's responsibility to submit grade notices to OHR.*** Submit completed and signed application to the Office of Human Resources, Training & Organizational Development Team, 255 Rockville Pike, Suite 102. For further information call (240) 777-5116.

RECOMMENDATIONS: Please provide the requested information on applicant. (This section to be filled and signed by President of MCVFRA)

LFRD PRESIDENT

1. Applicant is an active Volunteer and he/she appears on the most recent certified list of active volunteers. **Yes**___ **No** ____

   If yes, please attach with this application a copy of the most recent certified list of active volunteers.

2. Applicant is qualified under the point system in the Montgomery County Code, Section 21-21. **Yes**_____ **No**_____

3. Volunteer's Educational Objective (please check the appropriate statement) :

   - Degree is related to MCVFRA member current job functions or career ladder in the same job series or profession (Please see attached course description from the employee **Yes**____ **NO**___
   - This is an individual course(s) not leading to a degree which is related to MCVFRA member current job functions or career ladder in the same series or profession (Please see attached course description from the employee **Yes**____ **NO**___

4. Employee work performance is in good standing. **Yes**____ **No**_____

5. Employee is attending course work during his/her off-duty hours. **Yes**_____ **No**_____

RECOMMENDATION: APPROVAL _____ **DISAPPROVAL** _____

Please briefly describe the basis for disapproval.

_____

_____

Signature and title Date

Montgomery County Fire and Rescue Service Chief (This section to be filled and signed by Montgomery County Fire Chief or his/her designee)

I concur _____ do not concur _____ with the recommendation of the President of MCVFRA.

REMARKS:

_____

Signature and title Date

OFFICE OF HUMAN RESOURCES ACTION

Previous tuition assistance received under tuition assistance by applicant during the fiscal year for which this application is made.

$ _____ Application Approved for $ _____, Application Disapproved _____

THIS COURSE(S) IS _____ IS NOT _____ PART OF A PROGRAM OF STUDY THAT COULD QUALIFY THE EMPLOYEE FOR A NEW TRADE OR BUSINESS

Coordinator's Signature

Date