

The purpose of this program is to encourage Associates to further their professional and technical skills by offering financial assistance for educational courses or degree programs through accredited institutions. The focus of this support is on programs that will provide eligible Associates with an opportunity to enhance job performance and job satisfaction, as well as improve their opportunity for career advancement. It is expected that this support will further improve the quality of services provided to the communities served by Sacred Heart Hospital on the Emerald Coast (SHHEC).

DEFINITIONS

Associate: An employee of SHHEC who provides services on a regular basis in exchange for compensation, receives a W-2, and who does not provide these services as an independent business contractor.

Employment Hours Eligibility: Associates who work full-time (80 hours bi-weekly) or part-time (48 hours bi-weekly).

Covered Courses: Classes offered by an accredited institution of higher learning for Undergraduate and Graduate Degree Programs, and certain programs in healthcare or job related fields. Limited to Associate, Bachelor and Master Degree Programs.

Annual Reimbursement Maximum: \$1,000 for full-time employed associates and \$500 for part-time employed associates. There is no lifetime maximum.

PROCEDURE

1. Eligibility Details:

Associates who have completed six (6) continuous months of employment at SHHEC in a benefits-eligible position before the start of the applicable course, may be eligible to receive tuition reimbursement for covered courses up to the annual maximum of \$1,000. There is no lifetime maximum.

The following criteria must be met for an Associate to qualify for reimbursement:

- A. Associates must request approval prior to the start of the course to be eligible for reimbursement. Reimbursement will always be contingent upon availability of Guild funds.
- B. Associates who have a portion of their tuition cost paid for by Veteran's benefits, grants, scholarships, or through Sacred Heart Health System's Tuition Reimbursement Program, must include that information on their SHHEC Guild Tuition Reimbursement Application. The sum of all forms of assistance may not exceed the Associate's total expenses for tuition, books and lab fees.
- C. The day the course ends is the date used towards the annual accrual limit. Example: If the course ends in December 2014, reimbursement will apply to the 2014 maximum benefit even if it is not reimbursed until January 2015.
- D. The selected course must be taken from an educational institution that is accredited by an agency recognized by the U.S. Secretary of Education.
- E. The Associate must receive a grade of "C" or better for undergraduate courses, and a grade of "B" or better for graduate courses. Pass/Fail courses must be passed to receive reimbursement.
- F. Associates who have a change in job status from full-time to part-time or part-time to full-time will be reimbursed according to their status when the class started. Subsequent classes will be reimbursed based on current job status.
- G. Applications for reimbursement will not be granted if the Associate is on a Leave of Absence, Family Medical Leave of Absence, or Educational Leave. However, if the application was approved and the course started prior to the leave beginning, the Associate may be reimbursed, provided all other requirements are met.
- H. Associates who have received a written warning within the previous twelve (12) months of a course start date are not eligible for tuition reimbursement.
- I. There will be no reimbursement for Associates whose employment is terminated for any reason prior to the completion of a course.
- J. There are no limitations or exclusions from receiving assistance based upon an Associate's age, sex, nationality, religion, marital status, race, disability, or genetic information.

2. **Application Submitting Process:**

- A. Applications for tuition reimbursement are available through the SHHEC website at www.sacredheartemerald.org/volunteer.
- B. The completed Tuition Reimbursement Application, proof of class registration and copies of receipts for tuition, books, and lab fees, must be submitted to the SHHEC Guild Education Committee through email to shhecguild@shhpens.org for approval before the start of the course.
- C. Notification of approval or denial will be returned to the Associate by the SHHEC Guild Education Committee no later than 21 days after receipt of the required documents.
- D. The Associate must submit proof of his or her final grade to the SHHEC Guild Education Committee through email to shhecguild@shhpens.org within thirty (30) days of course completion. Failure to submit by the 30-day deadline may result in non-payment.
- E. The SHHEC Guild Education Committee will review all documents for compliance and instruct the Guild Treasurer to generate a check payable to the Associate.

3. **Principles:**

Periodically, the United States Congress reviews educational assistance procedures and changes the taxable status of assistance paid directly to associates. The IRS then issues new regulations for the programs. The SHHEC Volunteer Guild will conform to any new legally required tax regulations.

Sacred Heart Guild Tuition Reimbursement Application

Last Name:	First Name:
Associate ID Number:	Social Security Number:
Department Name:	Manager's Name:
Best Phone Number:	Email Address:

Hired Date:

Name of College/University:

Title of Course 1:

Begin Date:	End Date:	Credit Hours:	Total Cost: Course, Books, & Lab Fees
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Title of Course 2:

Begin Date:	End Date:	Credit Hours:	Total Cost: Course, Books, & Lab Fees
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Title of Course 3:

Begin Date:	End Date:	Credit Hours:	Total Cost: Course, Books, & Lab Fees
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Are the Above Courses Part of a Degree Program, Yes or No?

If Yes, Is the Degree an Associate, Bachelor, or Master Degree?

What is the Name or Degree Major?

Provide a Written Explanation of Why You Are Seeking This Degree and Its Benefit to SHHEC.

Projected Degree Completion Date:

Are You Currently Receiving Tuition Assistance From Other Sources For These Courses, Yes or No?
 If Yes, List the Sources and the Amounts

Source 1:	Amount:
Source 2:	Amount:
Source 3:	Amount:

I, the undersigned, have completed six (6) continuous months of employment in a benefits-eligible position at SHHEC, have not received a written warning within the last twelve (12) months, and acknowledge that the information provided on this application is complete, true and accurate. I acknowledge that it is my responsibility to understand any Internal Revenue Code rules that may result in my being liable for potential taxes on this reimbursement.

Associate's Signature:

Date:

THIS SECTION TO BE COMPLETED BY THE ASSOCIATE'S MANAGER AND COO:

Are the above courses/degree program job related and/or could lead to qualifications for another position within SHHEC where there is a continuing need?

Yes or No:

Manager's Signature:

Date:

Yes or No:

COO's Signature:

Date:

THIS SECTION TO BE COMPLETED BY THE SHHEC GUILD EDUCATION COMMITTEE

Date Application Electronically Received:

Time Application Electronically Received:

Reviewed and Denied By:

Date:

Reason for Application Denial:

Date Application Denial Notification Was Sent to the Associate:

Reviewed and Approved By:

Date:

Date Application Approval Notification Was Sent to the Associate:

Date Course Grades Were Received:

Grades Reviewed and **Reimbursement Denied** By:

Reason:

Grades Reviewed and **Reimbursement Approved** By:

Date:

Full or Partial Approval:

Comments:

Date Treasurer Notified to Process Payment:

Payment Amount:

Check Number:

Check Date:

Annual Reimbursement Applies to What Education Year?

Submitting: This Tuition Reimbursement Application, proof of class registration and copies of receipts for tuition, books, and lab fees should be submitted to the SHHEC Guild Education Committee by email to shhecguild@shhpens.org. Incomplete applications and applications submitted without proof of registration and/or receipts will not be considered.