



# SARASOTA COUNTY GOVERNMENT

## Education Assistance Request Form

Employee \_\_\_\_\_  
 Home Address \_\_\_\_\_  
 \_\_\_\_\_  
 Job Title \_\_\_\_\_

Core Service \_\_\_\_\_  
 Process Unit \_\_\_\_\_  
 Charge to Account \_\_\_\_\_ -500544

I have successfully completed any required initial probationary period, and if applicable, have received an overall achieves or exceeds rating on my performance review or am in a position classified as At-Will. In accordance with the Education Assistance Guidelines, I "shall be required to repay any reimbursements received in the 12 months prior to separation on a pro-rated basis prior to separation." Repayment may be withheld from my final pay.

\_\_\_\_\_  
 Employee Signature / Date

- Course is Job Related
- Course is not Job Related but required for Degree
- Full-Time Employee
- Part-Time Employee (FTE \_\_\_\_\_)

- AS / AA
- BS / BA
- MS / MA / MBA
- Executive MBA

Major \_\_\_\_\_  
 Institution \_\_\_\_\_ Course Dates \_\_\_\_\_  
 Course Title \_\_\_\_\_ Total Cost \_\_\_\_\_  
 Course # \_\_\_\_\_ Course Credits \_\_\_\_\_ Final Grade \_\_\_\_\_

**\*\*\* FOR USE BY MANAGER ONLY \*\*\***

Manager's comments on appropriateness of course/degree to job or which County job classification has been identified as a reasonably obtainable promotional objective must be listed below.

\_\_\_\_\_  
 \_\_\_\_\_

- Approval Recommended
- Approval Not Recommended

\_\_\_\_\_  
 Manager Name (PLEASE PRINT)

\_\_\_\_\_  
 Manager Signature / Date

**\*\*\* FOR USE BY TALENT & PERFORMANCE MANAGEMENT ONLY \*\*\***

- Payment Approved
- Entered in TRAC Transcript
- Verified Home Address in HR System

\_\_\_\_\_  
 Talent & Performance Management / Date

**Reimbursement**

- State / County Institution
- Private School / On-line Course

<input type="checkbox"/> Final Grade A - 90%	\$ _____
<input type="checkbox"/> Final Grade B - 80%	\$ _____
<input type="checkbox"/> Final Grade C - 70%	\$ _____
<input type="checkbox"/> "Pass" Status - 90%	\$ _____