

## Northwest Louisiana Technical Community College

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### *Tuition Assistance for Full Time Employees*

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Original Adoption: February 9, 2015

Effective Date: February 9, 2015

Last Revision: July 5, 2023

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Northwest Louisiana Technical Community College (NLTCC) establishes a practice of educational assistance for full-time unclassified employees. To be eligible to receive educational assistance, the employee must have been employed at least one year in a full-time, permanent position and receive approval from their supervisor and the college Chancellor.

While the College encourages further education for all employees, tuition assistance it is not a guarantee. There are situations when the employee's request cannot be approved. Employees, who submit a request and are denied, will be notified in writing of the reason for the denial.

#### **Definitions**

- Full-time Employee: An employee working 40 hours a week or 80 hours in a pay period; or, faculty placed under contract or under a letter of appointment to a permanent position for a period encompassing most or all of the entire academic year (i.e., faculty contracts or appointments of not less than 9 months). A student is not eligible if the individual's primary status is as a student, or the individual works in a student designated position, since this is intended as an employment benefit.
- Educational Assistance: Financial support for approved job related educational courses, professional certifications or licenses, or the acquisition of a degree. Financial support consists of the costs of tuition and applicable mandatory attendance fees.

#### **Program Requirements**

- Course Criteria: Requests for educational assistance must be for courses that are job related or part of a degree program. All academic courses must be taken at a Louisiana state college or university that is a regionally accredited institution.
- Employee Eligibility: Participation is limited to a full-time employee who has been employed at least one year in a full-time permanent position and who receives approval to register for the course(s) from his or her supervisor and Director.
- Submission of Requests: Employees must request education assistance and receive approval prior to the start of class.

- Course Limits: Employees may take up to six credit hours of course work per semester (or the equivalent under other than regular semester systems).

### **Reimbursement of Tuition**

Employees pay the required tuition and applicable mandatory attendance fees initially and are reimbursed for the costs when the course is completed and appropriate documentation is submitted.

- The course must be completed satisfactorily with a grade of “C” or better, or “Pass” if a Pass/Fail course, to be eligible for reimbursement.
- The employee must produce documented proof of successful completion of the course before reimbursement.
- This benefit does not cover fees or financial penalties associated with a dropped course, a course from which the student withdraws, or other types of financial penalties due to failure by the student to meet set deadlines.

Any employee who wants to request Tuition Reimbursement will be required to complete an Initial Tuition Reimbursement request form before the beginning of the semester and then a Final Tuition Reimbursement request at the end of the semester. If the Initial Tuition Reimbursement form is not approved, no tuition will be reimbursed at the end of the semester. Failure to submit one of the required forms or required documentation will result in zero dollars being reimbursed.

### Continuation Requirements

Any employee receiving tuition assistance will be required to sign an employment continuation agreement. When the tuition reimbursement payment is made, the employee will be required to sign an agreement to remain an employee of NLTC for at least two months from the date of receipt (of the reimbursement payment) for each credit hour reimbursed. (For example, if 6 credit hours are taken, a continuation agreement of 12 months will be required.) If the employee separates from NLTC prior to the end of the continuation period, the amount due back to the employer will be pro-rated.

### **Educational Leave**

Employees are encouraged to schedule courses with minimal disruption to their regular work schedule by taking courses outside of regular work hours, on-line, or making up work hours missed with the supervisor’s approval. In all such situations, the employee’s taking of a course should not adversely affect department services.

See NLTC Policy #6.005, “Tuition Exemption/ Continuing Education” for further information on educational leave and a request form.

### **Tuition Waiver**

Employees taking courses at a Louisiana Community & Technical College System college will be directed to NLTC Policy #6.005, “Tuition Exemption/ Continuing Education”, before requesting tuition assistance under this policy.

### **College Agreements**

To the extent possible, NLTC employees should maximize the use of any available tuition/fee agreements with other four year universities or colleges in providing discounted tuition or fee rates for employees attending these institutions.

**Financial Aid**

If an employee is eligible for a Federal Pell Grant, they will not be eligible for tuition reimbursement. Before submitting any forms for a tuition reimbursement request, the FAFSA (Free Application for Federal Student Aid) paperwork should be completed and submitted online. The results for Federal Pell from the U.S. Department of Education showing the person's ineligibility will be required to be submitted with the request for tuition assistance.

**Exceptions**

The NLTCC Chancellor may approve a policy exception if it is in the best interest of the college. Exceptions shall be justified, documented and kept on file at the college.

Approved:



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Jayda Spillers, Ed.D.  
Chancellor

# Northwest Louisiana Technical Community College

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## ***Initial Request for Tuition Assistance And Employment Continuation Agreement***

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Name: \_\_\_\_\_ Employee ID #: \_\_\_\_\_  
Department: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Office phone: \_\_\_\_\_ Cell/home phone: \_\_\_\_\_

### **Tuition Assistance Program – up to 6 credit hours per term**

Institution: \_\_\_\_\_ Term: \_\_\_\_\_

Course	Title	Hours/CEUs	Class period (time/days)	Estimated Cost

Employee's current degree status: \_\_\_\_\_ Degree/Area Sought: \_\_\_\_\_

This course of study enhances the employee's value to NLTCC as defined below (check one):

Support for a course that is part of a degree program; specify degree: \_\_\_\_\_

Support for an employee training or retraining to enhance job related expertise; explain:  
\_\_\_\_\_

Other (explain): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total anticipated reimbursement requested: \_\_\_\_\_. Reimbursement may not exceed eligible tuition and mandatory attendance fees for a maximum of six credit hours per semester.

By requesting support for tuition assistance, I agree with the stipulations listed in a- below:

- a. The recipient is a full time employee working 40 hours a week or 80 hours a pay period; or, faculty placed under contract or letter of appointment to a permanent position for a period encompassing most or all of the academic year (i.e., faculty contracts or appointments of not less than 9

months). Further, he or she must have been employed at least one year in a full-time permanent position prior to participating in the course.

- b. Upon completion of the course(s), the recipient must remain employed by the institution for not less than two months of full-time employment from the date of reimbursement for each credit hour reimbursed. If the employee separates from NLTCC prior to the end of the continuation period, the amount due back will be pro-rated.
- c. Satisfactory completion of coursework must be demonstrated to receive reimbursement and to remain eligible for continued participation in the reimbursement program.
- d. Courses should be scheduled with minimal disruption to the employee's regular work schedule and to avoid adversely affecting department services.
- e. All other requirements provided in NLTCC Policy # 6.024 must be met as well as internal policies if applicable.

**I have read and fully understand the requirements related to my stated request for tuition assistance, including stipulations related to future use of the program, proof of satisfactory course completion, provision of receipts for reimbursement requests, and stipulations related to payback provisions.**

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

**I approve the above request and have addressed scheduling issues related to the employee's attendance in the classes detailed in the above request.**

\_\_\_\_\_  
Supervisor's signature

\_\_\_\_\_  
Date

**I attest that the employee meets the program requirements for the above stated request**

\_\_\_\_\_  
Office of Human Resources

\_\_\_\_\_  
Date

**I approve the above request.**

\_\_\_\_\_  
Chancellor's signature

\_\_\_\_\_  
Date

**APPROVAL AT THIS TIME DOES NOT GUARANTEE CONTINUED APPROVAL**  
*(Place in Employee File when approved)*

# Northwest Louisiana Technical Community College

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## ***Final Request for Tuition Assistance And Employment Continuation Agreement***

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Name: \_\_\_\_\_ Employee ID #: \_\_\_\_\_  
Department: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Office phone: \_\_\_\_\_ Cell/home phone: \_\_\_\_\_

### **Tuition Assistance Program – up to 6 credit hours per term**

Institution: \_\_\_\_\_ Term: \_\_\_\_\_

Course	Title	Hours/CEUs	Class period (time/days)	Completion Date

Total reimbursement requested: \_\_\_\_\_. Reimbursement may not exceed eligible tuition and mandatory attendance fees for a maximum of six credit hours per semester.

**A copy of my transcript is attached providing proof that I have satisfactorily completed the courses listed above. All other necessary receipts are attached to support my request for reimbursement of tuition. My signature below attests to their authenticity and my completion of the required coursework.**

\_\_\_\_\_  
Applicant's signature Date

**I approve the above request.**

\_\_\_\_\_  
Supervisor's signature Date

**I attest that the employee meets the program requirements for the above stated request**

\_\_\_\_\_  
Office of Human Resources Date

**APPROVAL AT THIS TIME DOES NOT GUARANTEE CONTINUED APPROVAL**  
*(Place in Employee File when approved)*