COUNTY OF TUOLUMNE
EDUCATIONAL ASSISTANCE PROGRAM

PROGRAM OVERVIEW

The County of Tuolumne’s Educational Assistance Program provides non-taxable financial support to employees who pursue professional growth and development through formal higher education. This policy is intended to be a qualified educational assistance program pursuant to the Internal Revenue Code [26 USC Section 127] and Internal Revenue Service (IRS) Regulations [26 CFR 1.127-2]. This policy complies with existing IRS laws and regulations.

The IRS requires that the tax-exempt program be maintained separate from any other County of Tuolumne educational assistance program. The Education Assistance Program does not discriminate between employee classifications; favor higher compensated employees over other employees or favor one type of qualified educational pursuit over another.

The County Administrator is responsible to administer this program and is committed to ensuring each employee has equal opportunity to participate in the program, regardless of the department an employee resides in or their classification. Program participation will be prioritized in the following manner:

- Employees from every department shall be given the opportunity to participate in the program. First priority will be given to eligible requests from each department before multiple requests from the same department are considered. Once employees are enrolled in the program and continue to remain eligible, they will be allowed to remain in the program until completion of their education, subject to Funding Availability Maximum Amount, set forth below.

- If a department has an employee already enrolled in the program, any subsequent and approved department requests will be placed in a waiting list until funds are available to process the request.

- Multiple requests from the same department will be considered in the order received.

FUNDING AVAILABILITY MAXIMUM AMOUNT:

Program requests will be received at any time up to April 1 for the following fiscal year beginning July 1.

For General Fund departments, each year the Board will set a specific amount of funds (maximum dollar amount) in the Employee Development and Recognition cost center. Once the maximum dollar amount of funds set for this program have been expended for the fiscal year, no further financial reimbursements will be made.

New requests to participate in the program will be approved based on funding availability.
All claims received and approved from employees who reside in the General Fund shall be paid out of the Employee Development and Recognition cost center (0001-104200-528302).

For non-General Fund departments, the Board will set a specific amount of funds (maximum dollar amount) in the respective non-General Fund department’s cost center and claims received from employees in these non-General Fund departments shall be paid out of the employee’s home cost center. Once the maximum dollar amount of funds set for this program have been expended for the fiscal year, no further financial reimbursements will be made. New requests to participate in the program will be approved based on funding availability.

ELIGIBLE EMPLOYEES

- All County full-time and part-time permanent benefited employees are eligible to be considered for qualified assistance under the program.
- For the purposes of the program, “part-time” is defined as working 40 hours or greater per pay period.
- Spouses and dependents of employees who are not County employees are not eligible for assistance.
- Employees participating in the program must maintain continuous County employment from the date of enrollment until the date the reimbursement is actually paid to the employee. The only exception is that employees who are laid off for non-disciplinary reasons can remain eligible for benefits under the program for courses that were approved, and for which enrollment has already commenced, prior to the effective date of the layoff.

ELIGIBLE PROGRAMS

Reimbursement under this plan shall be limited to educational assistance as defined by the IRS. The benefits provided under the program must consist solely of educational assistance as defined by IRS Regulation 1.127-2(c). For purposes of this program, the term “education” is defined as any form of formal instruction, degree program or training that improves or develops the capability of an individual for their current position with the County or a future position to which they hope to promote within the County. The County retains discretion to determine which educational programs are eligible for reimbursement under the program.

For purposes of this program, eligible programs shall be defined as follows:

1. Programs shall relate to the work of the employee’s position or occupation, or
2. Programs shall prepare the employee to transition to an alternate County occupation, or
3. Programs shall prepare the employee for advancement to positions of greater responsibility in the County.

- Education paid for or provided under a qualified program may be furnished directly by the employer, either alone or in conjunction with other employers, or through a third party such as an educational institution. [26 CFR 1.127-2(c)(4)]
• This program treats institutions located outside of Tuolumne County the same as institutions within Tuolumne County.

ELIGIBLE EDUCATIONAL EXPENSES

The following costs are eligible for reimbursement:

• Tuition Fees
• Registration Fees
• Student Identification Card Fees
• Required Lab Fees
• Required Textbooks
• Required supplies that are not retained after the course is completed.
• Proctor/Testing Fees
• Other costs or fees not listed above may be reimbursable if the County Administrator determines they are necessary

EDUCATIONAL EXPENSES WHICH ARE NOT ELIGIBLE FOR REIMBURSEMENT

The County will not reimburse or pay for the provision of:

• Tools or supplies (other than textbooks) that the employee may retain after completing a course of instruction
• Meals, lodging, transportation (including parking and mileage)
• Education involving sports, games, or hobbies, unless such education involves the business of the County of Tuolumne or is required as part of a degree program. The phrase “sports, games, or hobbies” does not include education that instructs employees how to maintain and improve health as long as such education does not involve the use of athletic facilities or equipment and is not recreational in nature. [26 CRF 1.127-2(c)]
• Processing or financing fees relating to tuition deferral or installment payments
• Postage, shipping, or handling of educational materials, textbooks, or supplies
• Educational courses normally paid by a department or that are a normal requirement of an employee’s job are not eligible.

ANNUAL REIMBURSEMENT LIMIT

• Reimbursement under this program shall not exceed the calendar year limit established by the IRS.
• Undergraduate degree programs and other educational courses or programs shall be reimbursed at 100% of the eligible cost. Graduate and post-graduate degree courses shall be reimbursed at 50% of the eligible cost.

EMPLOYEE OBLIGATIONS

The employee must submit the Educational Assistance Claim Form to their Department Head for approval before it can be forwarded to the County Administrator for final approval.
Reimbursement:
- Employees must comply with the Educational Assistance reimbursement procedures below.
- Employees must complete the required notification and claim forms, provide documentation regarding course completion and grades, as well as receipts, cancelled checks, or other substantiating documentation for other costs being claimed.
- Expenses that are reimbursed by other sources of financial aid are not eligible for reimbursement under the Educational Assistance Program. This exclusion does not apply to loans.

Justification:
- In order to be responsible with taxpayer dollars, employers should review multiple programs/courses before making a selection. Employees must provide written justification for the program or course they have chosen, including an analysis of similar programs, if applicable considering cost, location and quality and a statement as to why the recommended program or course was chosen. Department heads will review submitted justification and, if approved, will forward the request to the CAO (or designee) for approval.

Grades:
In order to qualify for reimbursement for educational expenses under this program, an employee must receive a passing grade of “C” or better (or the equivalent).
- If an “I” or “Incomplete” is given, the employee will have until the end of the following quarter/semester in which to complete the course in order to receive reimbursement.
- For eligible courses taken on a “Pass/Fail” basis, a grade of “Pass” must be awarded to be eligible for reimbursement.
- Withdrawal from a course prior to completion will result in the denial of reimbursement.
- Educational Assistance funds may not be used for courses that are only audited by the employee (e.g., the employee does not receive a grade or units of credit).

Once an employee and his/her associated program has been deemed eligible for reimbursement, the employee may receive reimbursement, provided the funds are available and the eligible employee remains continuously enrolled in a qualified program. Written requests to suspend participation in the program will be considered by the County Administrator on a case-by-case basis.

If an employee enrolls in a course without receiving written approval from CAO (or designee), employee may not be eligible for reimbursement.

DEPARTMENT ROLE

The Department Head reviews requests from employees and makes recommendations for approval to the CAO (or designee).
The Department Head or designee will facilitate the process by reviewing the paperwork for completeness, determining eligibility, and then forwarding requests and attachments to the County Administrator’s Office.

Courses should normally be taken outside of scheduled working hours. However, if the course is offered only during working hours, the employee must have Department Head approval to alter their work schedule or to use vacation, paid time off or compensatory time off. The department must determine that the employee’s attendance at class(es) will not adversely affect department services and approve an alternate work schedule.

The Department Head should consider a variety of factors when reviewing requests including:

- Organizational needs (i.e. hard-to-fill vacancies)
- The relevance of program to County Operations
- Employee growth and development opportunities

The Department Head will provide information to all employees about the program on an annual basis.

Appeal:
- If the Department Head denies a request for an employee to participate in the Education Assistance Program, the employee may appeal the decision to the County Administrator or her/his designee.

COUNTY ADMINISTRATOR’S ROLE

- The County Administrator establishes the procedures for submission.
- The County Administrator or designee will administer the program, will review the request from the employee and Department Head, confirm eligibility, and approve or disapprove requests.
- All requests to participate in the Education Reimbursement Program will be subject to final approval of the County Administrative Officer and are subject to availability through budget appropriations.
COUNTY OF TUOLUMNE
EDUCATIONAL ASSISTANCE PROGRAM
PROcedures

PROCESSING A CLAIM FOR REIMBURSEMENT

1. The employee shall return the completed Claim Form to the Department within 60 days after course grades are posted with the following attachments:
   - Completed County of Tuolumne Claim Form which has been signed by the employee
   - Copy of official grade report, certificate, or letter of satisfactory completion.
   - Copies of all receipts associated with coursework (e.g., registration, tuition, textbooks, lab fees, etc.)
   - Information about any other financial assistance, such as veteran benefits, grants or scholarships.

2. In order to qualify for reimbursement for educational expenses under the program, an employee must provide documentation that he or she received a passing grade of “C” or better (or the equivalent). For eligible courses, which are taken “Pass/Fail”, a grade of “Pass” must be awarded to be eligible for reimbursement.
   - If an “I” or “Incomplete” is given, the employee shall so notify the Department and the employee will then have until the end of the following quarter/semester in which to complete the course in order to receive reimbursement.

3. Reimbursement of claimed items shall be based upon the availability of associated receipts. If receipt(s) are not included with claim form, item(s) being claimed will not be reimbursed.

4. The Department verifies that:
   - Course was completed with a grade of “C” or better, or a grade of “Pass” if the course is offered on a Pass/Fail basis.
   - All receipts for expenses incurred are associated with reimbursement claim.

5. The Department reviews the packet, indicates approval by signing the Claim Form and forwards appropriate forms and attachments to the Auditor/Controller Office Attn: Accounts Payable.

6. Auditor/Controller processes the claim for payment and forwards the check within 15 days from the time received by the Administrative Office.

failure to seek reimbursement within the 60-day period is deemed a waiver by the employee to seek reimbursement and the employee may be removed from the Educational Assistance Program.
EDUCATIONAL ASSISTANCE PROGRAM APPLICATION

PLEASE SUBMIT ONE FORM PER CALENDAR YEAR.
Forms will be accepted at any time up to April 1 each year.

It is my intent to further my development through continuing education. I plan to seek reimbursement for eligible expenses under the Educational Assistance Program.

EMPLOYEE INFORMATION:

Name: ___________________________ Employee Number: ________________

Date: __________________________

Status:  □ Full-time Permanent  □ Part-time Permanent

Employee Phone#: ___________________________

Classification: ___________________________ Department: ___________________________

PROGRAM/COURSE INFORMATION:

Institution: ___________________________ Online:  □ Yes  □ No

Course/Degree Category:  □ Associate  □ Bachelor  □ Masters  □ Doctoral  □ Non-Degree  □ Other

Major ___________________________

Estimated cost of course and reimbursable expenses: $_________

Amount requested during calendar year: $_________

Attach written justification for the chosen program. See Education Assistance Program Policy for more information on what to include in justification.

If you will receive any veteran’s benefits or any other outside tuition aid, not including loans, please attach information listing types and amounts.

I understand only eligible expenses can be reimbursed and that I must comply with the Educational Assistance Program Policy and Procedures. My acceptance into the program is contingent upon approval by the Department Head, County Administrator and available funding.

Employee Signature: ___________________________ Name ________________ Date ________________

Departmental Review: ___________________________ Name ________________ Date ________________

County Administrative Office Approval: ___________________________ Name ________________ Date ________________
EDUCATIONAL ASSISTANCE PROGRAM
CLAIM FORM

Name: ____________________________ Employee # _____________________

Return this completed Claim Form to your Department Head within 60 days after course grades are posted. Attach the following:

- Copy of grade report, certificate or letter of satisfactory completion
- Copies of all receipts associated with coursework.
- Information about any other financial assistance, such as veteran benefits, grants or scholarships.

Potential reimbursement payments will not be made without supporting documentation.

| Course Title/Number | Course Start Date | Course Completion Date | Grade | Credit Hours/
|---------------------|------------------|------------------------|-------|----------------
|                     |                  |                        |       |                
|                     |                  |                        |       |                
|                     |                  |                        |       |                

Total Reimbursement Requested: ______________________

I attest the above and attached information is accurate to the best of my knowledge.

Employee: __________________________________________

Signature __________________________ Date ____________

I verify all courses were completed with a grade of “C” or better or “Pass” and that all necessary and eligible receipts and documents for reimbursement are included.

Department Head: ______________________________________

Signature __________________________ Date ____________