# SALARY/PROGRESSION/TRAINING & CERTIFICATION APPLICATION

This form must be submitted to the Employment Services Office after completion by the Supervisor.

- 1. With all information completed entirely;
- 2. With all required signatures; and
- 3. No later than the first day of class.

Funds are disbursed on a first come - first served basis.

Employment Services\_\_\_\_\_

| FOR UHR USE ONLY Amt Rsv |  |  |
|--------------------------|--|--|
| Amt Paid<br>Date         |  |  |
| Dutt                     |  |  |

| Click on line and begin typing.  Tab from field to field  PAR  | T I - PERSONAL                                  | DATA          |                        |  |
|--|---|---------------|------------------------|--|
| Employee Name  | Employee Group                                  |               | Grizzly ID             |  |
| Position Title   | Department                                      |               |                        |  |
| TelephoneSupervisor  | Class Status                                    | : FR/SO JR/SI | R GRAD Other           |  |
| PART II - COURSE DATA  |   |               |                        |  |
| InstitutionLocation  |   |               |                        |  |
| Date Semester Begins Date Semester Ends  |   |               |                        |  |
| Total CreditsCost F  | otal Credits Cost Per Credit Hour Total Tuition |               |                        |  |
| COURSE TITLE & NAME  | COURSE#   | CREDITS       | CLASS MEETING DAY/TIME |  |
|  |   |               |                        |  |
|  |   |               |                        |  |
| Part of an approved associate degree program. Yes No Held during my regular work schedule. Yes No If yes, please specify the hours in class  I understand the obligations set forth by Oakland University and my union contract or policy manual. I further understand that failure to comply with these obligations may result in a denial for reimbursement and may entail a payroll deduction for tuition repayment. Additionally, I accept responsibility for submitting to the Employment Services Office or my Department, within 20 days after completing a course other than at Oakland University, the following: 1. Evidence of tuition charges; 2. Evidence of payment; 3. Evidence of successful completion. I hereby authorize Oakland University to deduct from my earnings an amount sufficient to repay the Career Development Fund for unfulfilled obligations. |   |               |                        |  |
| PART III – SUPERVISOR DATA  Is the course(s) listed above part of a progression program for the employee? Yes No  Identify the program the employee is currently working on:   |   |               |                        |  |
| Which account should this course(s) be charged to: (   |   | •             | 2 of this document.)   |  |
| Dept Account – 33.1(a) Identify Fund No.   | Amt   | <del></del>   |                        |  |
| 17095 - 33.1(b) Amt<br>95660 (LOA) Amt   | _   |               |                        |  |
| Acknowledgment of Supervisor  PART IV – EMPLOYMENT DATA  |   |               |                        |  |

\_ Date\_

#### **DEFINITIONS**

### **Funded by Department**

Courses taken to satisfy the specific requirements of a particular skilled trades or groundskeeper/greenskeeper training program in order to progress through the classification levels up to and including an associate's degree in the respective training program.

(Refer to OUCMT contract paragraph 33.1(a))

If a course taken is being reimbursed partially from the Department Account and partially from the Letter of Agreement, note the amount covered by each under **Supervisor Data**.

#### **Funded by OU Contribution**

Courses taken by OUCMT employees who aspired to move into another classification. Example, a Custodian who wants to take classes to become an Electrician. \$2,000, contributed by OU each calendar year will be available from this fund.

(Refer to OUCMT contract paragraph 33.1(b))

## **Funded from OUCMT Training Fund Balance**

Courses taken outside of Oakland University and not covered by the above. \$2,000 will be contributed each year from the remaining OUCMT Training fund for this purpose. (Refer to OUCMT Contract Letter of Agreement)

If a course taken is being reimbursed partially from the Department Account and partially from the Letter of Agreement, note the amount covered by each under **Supervisor Data**.