

Educational Assistance to Dependents

Policy Number: HR 130

Responsibility:

I.ELIGIBILITY

Regular full-time employees with unmarried dependent children Kindergarten-12th grade and enrolled in approved parochial schools at the elementary and secondary levels, are eligible for tuition assistance for those dependents. A dependent child is defined as any unmarried natural or adopted child of the employee or the employee's spouse, as long as the child is claimed as a dependent on the employee's federal tax return. Amount of reimbursement is based upon the schedule listed below in Section III. If both parents of a child work for Kettering College, only one parent is eligible to receive tuition assistance for that child.

II. PROCESS

- The employee must complete and submit to the KC Director of Finance and Administration office an EAD application form prior to the beginning of the school term for which reimbursement is being requested.
- The employee must provide the school tuition and fee schedule as well as a copy of a statement/bill showing the tuition being charged for the semester.
- Attach a copy of bill/payments made to the school. Reported tuition costs should reflect the amount actually paid by the employee. If applicable, please indicate if full-day or half-day kindergarten attendance.
- A new application must be submitted each term.
- Once this information has been received, the appropriate reimbursement will be added to the employee's gross pay, paid through the normal payroll process.

NOTE: This benefit is taxable.



III. REIMBURSEMENT SCHEDULE

Full Time Employees receive benefit for dependents in Primary and Secondary schools (K-12).

The Reimbursement Benefit for tuition will be considered at thirty percent (30%) and capped at the highest published tuition category at Spring Valley Academy (Excluding course and other fees).

- Reimbursement will be based on money owed less applicable discounts
- Room and board costs are not eligible for reimbursement.
- Semi-annual reimbursements are scheduled for payment in October & March.

DATE OF ORIGIN: Faculty Handbook 2014-15 LAST REVIEWED: March 19, 2017 LAST REVISED: March 19, 2017 REPLACES: APPROVED BY: EFFECTIVE DATE: March 19, 2017

SEE BELOW FOR APPLICATION FORM FOR EDUCATIONAL ASSISTANCE TO DEPENDENTS



KETTERING COLLEGE APPLICATION FOR FOR EDUCATIONAL ASSISTANCE TO DEPENDENTS

For School Year <u>20</u> to <u>20</u>

KCMA EMPLOYEE INFORMATION

| Badge# | Department | | Ext |
|----------------------------|------------------|----------------|------------|
| Last Name | First Name | | MI |
| Address | | City | |
| State | Zip | Home Phone # | |
| Employee Status: Full Time | College Faculty | College Staff |] |
| DEPENDENT INFORMA | TION | | |
| Student Name | | Age Grade | |
| Number of Grading Terms | Tuition Per Term | Day School 🗌 | Boarding 🔲 |
| School Name | | Registrar Name | |
| School Address | | School Phone | |
| City | State | Zip Code | |
| DEPENDENT INFORMA | TION | | |
| Student Name | | Age Grade | |



| Number of Grading Terms | Tuition Per Term | Day School 🗌 | Boarding [|
|-------------------------|------------------|----------------|------------|
| School Name | | Registrar Name | |
| School Address | | School Phone | |
| City | State | Zip Code | |
| DEPENDENT INFORM | MATION | | |
| Student Name | | Age Grade_ | |
| Number of Grading Terms | Tuition Per Term | Day School 🗌 | Boarding [|
| School Name | | Registrar Name | |
| School Address | | School Phone | |
| City | State | Zip Code | |
| | | | |

Please complete <u>all</u> information requested on the application form in order to receive the reimbursement. Sign and date application. Bring to the Director of Finance office.

EMPLOYEE SIGNATURE _____ DATE_____

EMPLOYEE MUST ATTACH A COPY OF BILL/PAYMENT(S) MADE TO SCHOOL ALONG WITH THE TUITION AND FEE SCHEDULE