**Classified, Professional and Administrative**

**PROFESSIONAL DEVELOPMENT**

**FUNDING REQUEST**

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| **employee information** | |
| **Employee Name (First, Last, Middle Initial)** | |
| **Job Title/ Department** | **Email** |
| **Type of Funding Request** | |
| Professional Development – Complete Section A  Tuition – Complete Section B | |
| **Section A - professional Development** | |
| Professional development funds are available to enhance job skills or for professional growth, i.e., leadership, sustainability, etc. Training to meet employee job requirements should be funded by a department. Typically a request will be partially funded to allow several employees to utilize the fund annually. Describe below the development opportunity, its purpose, and how it will impact your position. | |
| Delivery method  Conference/workshop – location:   Online training  Other -  Dates:  Cost of Training:  Cost of Travel: Cost of Lodging: Other Costs:  Total Cost of Opportunity: Amount Requested: | |
| **SECTION B – TUITION** | |
| Employees seeking job-related bachelor, master, or doctoral degrees, currently enrolled in an accredited higher education institution (junior level or above), and who have been employed with FVCC a minimum of two years, are eligible to request up to $500 tuition assistance once per degree. Funds will be dispersed directly to the higher education institution. Deadline to apply is Jan. 15 annually.  Have you been awarded tuition assistance through this fund previously?  Yes  No  Length of employment with FVCC:  Are you currently enrolled in a degree seeking program?  Yes  No Date of enrollment:  Name of higher education institution:  Degree sought:  Current status toward degree:  GPA:  Amount Requested:    The recipient of tuition assistance funds agrees that if he/she leaves FVCC prior to one year after receipt of this award then the amount will be withheld from his/her pay. Further, the employee must receive passing grades in classes during the semester of this award and will provide the chair of the committee a transcript within 30 days of the semester’s conclusion. If the grades received are not passing, the employee agrees that the award will be withheld from his/her pay.    **I understand and agree to these terms of this agreement if I am awarded tuition funds.**  Employee Signature: Date: | |
| **SIGNATURE APPROVALS** | |
| Supervisor Signature: Date:  Committee Chair Signature: Date: | |
| **APPROVED FORM MUST BE SUBMITTED TO HR AT LEAST 30 DAYS PRIOR TO EVENT** | |