

**Tuition Reimbursement for NYSCOPBA-Represented Employees**  
**Guidelines for 2012-2014**  
**Applicant Information**

**FUNDING**

The State of New York/New York State Correctional Officer & Police Benevolent Association (NYSCOPBA) Tuition Reimbursement Program is funded by the 2009-2016 negotiated agreement between the State of New York and NYSCOPBA.

**ELIGIBILITY**

All full-time employees whose positions are assigned to the Security Services Unit represented by NYSCOPBA as of April 1, 2012 and who have had six months continuous state service immediately prior to the beginning date of the course work are eligible.

**COVERED EXPENSES**

Reimbursable expenses are those costs that relate to the pursuit of an educational activity. These expenses include tuition for approved credit or non-credit course work, individual course registration, and all mandatory fees. The program provides reimbursement retroactively for courses taken during the 2012-2013 fiscal year (courses beginning as of April 1, 2012 through March 31, 2013) and for courses taken during the 2013 -2014 fiscal year (April 1, 2013 through March 31, 2014). Total funds assigned to the program may be limited and are subject to availability.

Annual fiscal year allowance per applicant for:

April 1, 2012-March 31, 2013 = 100% of the covered tuition expense up to \$1,200

April 1, 2013-March 31, 2014 = 100% of the covered tuition expense up to \$1,200

Reimbursement within a fiscal year is determined by the start date of the course. The State fiscal year begins on April 1 and ends on March 31.

Additionally, applicants may be reimbursed for book expenses up to a maximum of \$250 per course. To be eligible, the applicant must provide proof from the educational organization that the reading material is mandatory for the related course. Shipping fees and taxes on mandatory reading material will be paid up to the \$250 maximum.

**APPLICATION SUBMISSION PROCESS**

Once registered for course work, an applicant must complete a separate Tuition Reimbursement Application SSU-004 form for each course for which reimbursement is requested. The SSU-004 form must be submitted to the agency/facility staff development or personnel office for review and approval prior to the start of the course.

## **APPLICANT REIMBURSEMENT PROCESS**

To obtain reimbursement, an applicant must complete the appropriate form/voucher with their agency. The applicant should confirm with their agency/facility staff development or personnel office as to which form should be used. Many agencies use the New York State Standard Voucher and/or the Claim for Payment Form. Employees of the Department of Corrections and Community Supervision should use the Standard Voucher. Documentation must include the employee's N number in the payee section of the voucher. Vouchers are available in the agency/facility business office following the receipt of a satisfactory course completion document.

A payment voucher must be submitted to the agency/facility staff development or personnel office for payment. *For DOCCS employees only:* All completed paperwork should be forwarded to your Regional Training Lieutenant (RTL) who will review, sign and forward to DOCCS Training Academy.

The voucher will be forwarded to the agency/facility finance office to be processed in accordance with the rules and regulations concerning the expenditure of state funds. These guidelines are subject to the discretion of the agency/facility. Please keep in mind that employee reimbursements are now paid through the Travel & Expense module via the Statewide Financial System (SFS). Therefore employee reimbursement is dispersed in the same manner as their salary payment. For those employees who have their salary payment directly deposited into an established account, the same process will be used to issue their tuition reimbursement.

Attachments to the payment voucher must include:

1. the original itemized paid receipt from the educational organization
2. a copy of the Tuition Reimbursement Application SSU-004 form indicating approval of the course
3. course completion document
4. proof of mandatory reading material from the educational organization for book expense reimbursement
5. the receipt must include book title

*Note: The satisfactory course completion document must include the original grade report, or a letter from the educational organization stating satisfactory completion of the course work. The letter must indicate the date of course completion.*

Applicants are advised to retain a copy of the application and documentation for records. The tuition reimbursement program is subject to limited funding and is administered on a first come, first serve basis. Accordingly, applications will be processed on a first-come, first-served basis until funding is exhausted.

## **DEADLINE FOR APPLICATION SUBMISSION PROCESS**

1. For courses taken between April 1, 2012 and March 31, 2013 all documentation needs to be submitted to the agency/facility staff development or personnel office on or before **August 31, 2013.**
2. For courses taken between April 1, 2013 and March 31, 2014 all documentation needs to be submitted to the agency/facility staff development or personnel office on or before **March 31, 2014.**

**Tuition Reimbursement Application (SSU-004 Form) for NYSCOPBA-Represented Employees  
For 2012 – 2014**

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Number of Years in State Service \_\_\_\_\_ Number of Years in Current Position \_\_\_\_\_

Title and Salary Grade \_\_\_\_\_

Agency/Facility \_\_\_\_\_

Work Location \_\_\_\_\_ Work Phone \_\_\_\_\_

Explain how this training will assist you in progressing toward reasonable career goals within state service.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Course Work & Financial Information**

Educational Institution \_\_\_\_\_

Address \_\_\_\_\_

Course Title \_\_\_\_\_ Course # \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_ Number of Credits \_\_\_\_\_ or Non-Credit \_\_\_\_\_

**Expense Category**

Course Tuition: \_\_\_\_\_

Other Mandatory Fees: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tuition and Mandatory Fees Total: \_\_\_\_\_

Less Other Sources of \_\_\_\_\_

Financial Aid (TAP, PELL, \_\_\_\_\_

Veteran's Benefits): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Less Other Sources of Financial Aid: - \_\_\_\_\_

Book Expense: + \_\_\_\_\_

Total Reimbursement Requested: \_\_\_\_\_

I affirm that all the above information is accurate and complete.

\_\_\_\_\_  
Employee Signature Date

**AGENCY/FACILITY ACTION:** Job-Related Course  Career-Related Course  Disapproved

Amount approved for course work \$ \_\_\_\_\_

Amount approved for book expense \$ \_\_\_\_\_ Date Applicant Notified \_\_\_\_\_

\_\_\_\_\_  
Authorizing Signature Title Date