

Educational Expense Reimbursement Application and Refund Requisition Form



HR-TRN-003

MTABSCDMPRD000374

Section 1 - Information and Instructions

The purpose of this form is to apply for tuition reimbursement for an upcoming course. Please read the instructions carefully to complete the form and determine eligibility to apply. If you have already completed a course without going through the tuition reimbursement process, you may not be eligible to apply for tuition reimbursement from the MTA.

Please comply with the following guidelines governing the reimbursement program. Also note that your agency may have specific policies that you must follow.

- 1) Read the MTA All-Agency Educational Expense Reimbursement Policy, including eligibility criteria, reimbursement conditions and exclusions. See the MTA HQ and agency intranet sites or contact your agency HR Dept. or Agency Educational Expense Reimbursement Program Administrator.
- 2) Complete the first page of this form. Use blank paper to provide additional information, as necessary.
- 3) Obtain signature approvals from your immediate Supervisor, Division Head (where applicable), and Department Head. Applications will not be accepted or reviewed once the course is in session, no exceptions (Note: NYCT employees have 60 days after the course start date). A copy of the description(s) of course(s), tuition and itemized fees related to the request must accompany the application. NOTE: This does not guarantee that all eligibility requirements have been met or that reimbursement funds are available.
- 4) Completed applications must be submitted to the appropriate agency Educational Expense Reimbursement Program Administrator for approval. The Program Administrator will forward the completed application to the BSC for processing.
- 5) Upon successful completion of the course, submit an official transcript of grades and an itemized cost breakdown of incurred expenses for reimbursement to the BSC. You can scan the documents and email them to bscservice@mtabsc.org; fax to 212-852-8700, or mail to MTA Business Service Center, 333 W. 34th Street, New York, NY 10001

If you have any questions, please contact the BSC at 646-376-0123 or bscservice@mtabsc.org.

Section 2 - Employee Information

Print Name	Last First M.I. Suffix						BSC ID
Agency (check one)	<input type="checkbox"/> BSC	<input type="checkbox"/> B&T	<input type="checkbox"/> CC	<input type="checkbox"/> HQ	<input type="checkbox"/> Police	<input type="checkbox"/> NYCT	Department
	<input type="checkbox"/> SIR	<input type="checkbox"/> LIRR	<input type="checkbox"/> MNR	<input type="checkbox"/> MTA Bus	<input type="checkbox"/> MaBSTOA		
Street Address							
City				State		Zip Code	
Phone (H)			Phone (W)			Email	
Position Title			Work Hours			Work Days	
<input type="checkbox"/> Represented		<input type="checkbox"/> Non-Represented		Date of Hire			

Section 3 - Program Information

Relationship of Course(s)/Program to Current/Potential (circle one) MTA Responsibilities:

Are you eligible for or are you receiving tuition assistance from any other source(s)? ☐ Yes ☐ No (If YES, provide details below)

Source	Amount \$	Source	Amount \$
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College or University	Institution's Website
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Type of Program: Graduate <input type="checkbox"/> Undergraduate <input type="checkbox"/> Certification/Certificate <input type="checkbox"/> Exam <input type="checkbox"/>	Credits Required	Credits to Date
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Field of Study/Major or list Certification

Date Course(s) Start	Date Course(s) End	Anticipated Date of Graduation
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Section 4 - Course Information							
Course Title	Course No.	No. of Credits	Day(s) Class Meet	Hours		Tuition	Agency Charge-Back Dept Code
				From	To		
						\$	
						\$	
						\$	
						\$	
Total Credits at \$ Per Credit						\$	
Registration Fee						\$	
Other Fees (List)						\$	
Total						\$	
Less Assistance From Other Sources						\$	
Reimbursement Requested						\$	

Section 5 - Authorization
<p><i>Except as reported above, I have not received, nor am I eligible to receive any outside financial aid which is contingent upon attendance at an educational institution such as scholarships, fellowships, veteran's benefits, etc. I recognize that should such aid (applicable to periods for which I have accepted MTA Agency Educational Expenses) be received, I would be obligated to report such aid to the MTA Agency and repay an equivalent amount (up to the value of the applicable Educational Expense). I understand that if the above course(s) is approved under the guidance of the Educational Expense Program, payment will initially be made at my personal expense. I understand that I will be entitled to reimbursement for applicable tuition and fees upon the submission of an itemized cost breakdown, proof of satisfactory completion and paid receipt, which must be submitted and attached to the application within six months of course completion. I permit the release of documents to the MTA Agency from relevant institutions to verify the accuracy of documents I submitted. I understand that participation in this program will not automatically make me a candidate for promotion; nor will approval for participation imply consideration for promotion or other preferential treatment. Educational Expense is offered at the discretion of the MTA Agency, which has the absolute right to modify or discontinue this Program in whole or in part.</i></p> <p>I HAVE READ THE EDUCATIONAL EXPENSE REIMBURSEMENT POLICY (AVAILABLE ON THE AGENCY INTRANET OR THROUGH THE PROGRAM ADMINISTRATOR) AND I AGREE TO ALL TERMS AND CONDITIONS.</p> <p>Employee Signature _____ Date _____</p>

Section 6 - Checklist for Applicants
<p><i>Listed below is a description of the documents that are required to process your request for Educational Expense Reimbursement approval. As indicated in the MTA Educational Expense Reimbursement Policy, you must obtain signatures from both your department and from the Educational Expense Reimbursement Program Administrator. The employee assumes all financial obligations related to the program or course(s) unless and until the approval is granted. Employees are encouraged to seek approval prior to registration for the program or course(s).</i></p> <p>Please check off the following requirements when they have been submitted for approval:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Complete application <input type="checkbox"/> Completion of a minimum of six months of continuous satisfactory service/more than six months of continuous service per your Agency Policy/Procedure or completion of one year/ probationary period for union employees, per your agency policy. <input type="checkbox"/> Degree Program Acceptance Letter (if applicable) <input type="checkbox"/> School course description, tuition and other fee breakdown <input type="checkbox"/> Statement of Accreditation <input type="checkbox"/> Coursework is related to current or potential job responsibilities within the MTA Constituent Agencies, and the relationship has been explained on the application <input type="checkbox"/> Application is submitted, per your agency policy, prior to the class(es) official start date. <p>If requirements have been verified as having been met and required documents are attached, please forward application to your immediate supervisor for review and recommendation for processing.</p>

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Section 7 - Review, Recommend, and Approve for Participation

NOTE: Departmental recommendation addresses only whether the employee requesting educational expense reimbursement is in good standing in terms of attendance and performance, and whether the coursework will interfere with the proper and effective discharge of the employee's duties or otherwise render the employee unfit for duty. The Educational Expense Reimbursement Program Administrator's approval addresses: the employee's eligibility with regard to length of service; timely submission of application; eligibility of institutions/courses/fees; course appropriateness; assistance from other sources; available balance in employee's annual allotment; and availability of Program funds. (Employees of subdivisions or field offices must obtain necessary approvals before forwarding to Division Head.)

SIGNATURES

Immediate Supervisor **Recommend** ☐ Yes ☐ No

Title

Name (Print)

Signature

Date

Division Head (if applicable) **Recommend** ☐ Yes ☐ No

Title

Name (Print)

Signature

Date

Department Head **Recommend** ☐ Yes ☐ No

Title

Name (Print)

Signature

Date

Department Head **Recommend** ☐ Yes ☐ No

Title

Name (Print)

Signature

Date

Educational Expense Reimbursement Program Administrator **Approve** ☐ Yes ☐ No

Name(Print)

Signature

Date

Previous reimbursement this calendar year \$ _____

Reimbursement approved on this application \$ _____

Total reimbursement this calendar year \$ _____

Section 8 - Employee Request for Reimbursement Upon Completion of Coursework

When requesting reimbursement for course(s), please ensure that the following necessary items are enclosed:

- 1) Proof of Payment such as credit card receipt, bursar's receipt.
- 2) An itemized breakdown of costs including tuition and all fees incurred.
Note: LIRR accepts an itemized bill for the semester if tuition deferment is offered by the institution. A paid receipt must be submitted within two weeks of receiving reimbursement.
- 3) Verification of Satisfactory Grade.
 - a. Original Transcript* or Original Grade Report* indicating a grade C- or better for undergraduate courses, a grade B- or better for graduate courses, or a grade of "Pass" in a Pass/Fail course;
 - b. For license, certificate, or home study courses, evidence of successful completion of certification.

*Costs related to obtaining the Original Transcript or Original Grade Report are not reimbursable.

NOTE: Per your agency policy, if the person is not active with the MTA at the time of the reimbursement request, he/she will no longer be eligible for reimbursement and may be required to refund the agency.