

APPLICATION FOR TUITION REIMBURSEMENT & PROFESSIONAL DEVELOPMENT

C0-101-NR1 10/11/2023



Office of the State Comptroller
165 Capitol Ave
Hartford, CT 06106
www.osc.ct.gov

IMPORTANT! THIS APPLICATION MUST BE SUBMITTED TWO WEEKS PRIOR TO THE BEGINNING OF THE COURSE(S) TO THE OSC DIVISION DIRECTOR FOR INITIAL APPROVAL

NOTE: Upon completion of course(s) you must SUBMIT 2 COPIES OF ALL RECEIPTS and PROOF OF PASSING to your AGENCY APPROVAL by Feb. 1st, fall & summer courses, June 1st, spring courses.

NAME (Last) (First) (Middle)		EMPLOYEE NUMBER		UNION/BARGAINING UNIT CODE (e.g. 01 for Confidential Staff 02 for Managers)		
HOME MAILING ADDRESS NAME (No. and Street) (City or Town) (State) (Zip)			DEPARTMENTAL PAYROLL CODE			
TITLE		AGENCY NAME		WORK TELEPHONE NO.		
WORK ADDRESS (No. and Street) (City/Town) (State) (Zip)			WORK EMAIL ADDRESS			
EDUCATION INSTITUTE (Name) ADDRESS (No. and Street) (City or Town) (State) (Zip)		START			FINISH	
		Mo.	Day	Yr.	Mo.	Day
COURSE INFORMATION	TITLE AND NUMBER OF COURSES					NUMBER OF CREDITS
	1.					
	2.					
	3.					
	The above courses are	<input type="checkbox"/> Graduate	<input type="checkbox"/> Undergraduate	Job Related?		TOTAL CREDITS
	<input type="checkbox"/> Course	<input type="checkbox"/> Courses	<input type="checkbox"/> YES	<input type="checkbox"/> NO		
OBJECTIVE IN TAKING THIS COURSE (S) OR CURRICULUM						
COST IMPORTANT Be sure to show the cost of EACH CREDIT as well as the total cost of all credits in applicable spaces at the right PAYMENT IS SUBJECT TO AVAILABLE FUNDS!		CHARGE PER CREDIT	\$	X	TOTAL NO. CREDITS	TOTAL CREDIT COST \$
		Service Fee (Community Colleges Only) \$				
		Laboratory Fee \$				
		Other Fees \$				
		Sub Total \$				
		LESS - Financial-Aid Received from Other Sources \$				
		NET COST \$				
APPLICANTS CERTIFICATION PLEASE READ CAREFULLY PRIOR TO SIGNING		I certify that I am familiar with regulations for tuition-reimbursement and will comply with them. I will notify OSC if a course is failed or dropped. Upon completion of class, I will provide an official transcript/grade report OR A letter from a professor or educational institution letterhead indicating: the semester, the course title, the number of credits for the course, the grade or some other indication I have successfully completed AND ; Proof of payment, including an itemized receipt verifying the amount paid to the educational institution for course(s), registration fee and other applicable documentation. A receipt will not be considered adequate documentation for payment if it does not identify the institution or if it does not identify the student (i.e., in the case of an online grade report).				
		SIGNED (Applicant)		DATE (Mo., Day, Yr.)		
DIRECTOR RECOMMENDATION		I have reviewed the tuition guidelines and this application. ("X" APPROPRIATE BOX) I <input type="checkbox"/> DO <input type="checkbox"/> DO NOT recommend this person's participation.				
		DIRECTOR REASON FOR DENIAL				
		DIRECTOR APPROVAL OR DESIGNEE (Signature)		DATE	EMAIL	TELEPHONE NO.
AGENCY HEAD RECOMMENDATION		AGENCY HEAD REASON FOR DENIAL				
		AGENCY HEAD APPROVAL OR DESIGNEE (Signature)				DATE
APPSD ONLY: PAYMENT SPECIFICS		AMOUNT TO BE REIMBURSED	JOB-RELATED	NON-JOB-RELATED	DATE RECEIPT AND GRADES SUBMITTED	DATE PAYMENT REQUESTED
		\$	\$	\$		
PAYMENT APPROVALS		APPSD SIGNOFF:		DATE	APPSD: PROCESSED:	DATE

Step 1:

Employee completes the CO-101-NR1 form following the registration of classes (and once the class schedule has been confirmed)

**Step 2:**

Employee submits the CO-101-NR1 form and corresponding paperwork to their Director or Designee for approval

Step 3:

Director/designee confirms receipt of CO-101-NR1 form and signs the form under Director Recommendation section of form

**Step 4:**

Director or Designee sends copy of the CO-101 – NR1 to the Agency Head or Designee for Approval (signature in Agency Head Recommendation Section of form)

Step 5:

Copy of the CO-101-NR1 form is sent to APPSD Tuition & Travel Unit.

**Step 6:**

Upon completion of the class, employee submits proof of grades and detail payment (including method) of class to AOSC APPSD Tuition & Travel Unit.

Step 7:

OSC Division Director/designee acknowledges receipt of the CO-101-NR1 form along with final grades and payment

**Step 8:**

OSC APPSD Tuition & Travel unit enters payment into Core-CT for reimbursement to employee. Verify 75% of UConn's cost per credit and employee has not exceeded \$5,000 for the FY.