O Ø ℗ ⋔ SETA

FOR DELEGATE STAFF ONLY Delegate Pre-Approval & Request for Tuition Reimbursement

Applicant Name:		Email Addı	Email Address:			
Home Address: City, State, Zip: SETA/Delegate Agency:		Job Class:	Job Class:			
			Home/Contact Phone:			
		Work Phor				
Job Site:		Direct Sup	Direct Supervisor's Name:			
Course Information & Pre-Approval:						
Instructional Institution:						
	emester/Qua		er End Date: Late Registration Deadline:			
(MM/DD/YYYY) Course	Unite		DD/YYYY) (MM/DD/YYYY) Books (SUBMIT reading lists)			
	Units	Tuition				
		TUITION	BOOKS SUBTOTAL: \$			
		subtotal: \$				
TOTAL Amount Requested for Reimbursement:	\$					
I am working towards an: AA \square BA \square	MA 🗇 Pe	ermit 🗆 † Certificate 🕇	Other:			
I have completed an educational "roadmap" wit	h an advisor,	counselor at a commu/	nity college or university. YES │ NO │			
I have a current Individual Staff Development Pla	an (ISDP) and	I the course work is inc	luded in the plan. YES \square NO \square			
Applicant's Signature:			Date:			
			or the Head Start Career Reimbursement Program (CIP). I er delegate agency Head Start funds for the same coursework			
Delegate Director or Designated Staff (pre-approv	al)		Date:			
Name (Printed)	Email	:	Phone:			
	FINAL AF	PROVAL FOR REIMBUR	RSEMENT			
			fter completion of the coursework			
and	prior to sub	mission to SETA for rei	mbursement.			
			for the Head Start Career Reimbursement Program (CIP). I her delegate agency Head Start funds for the same			
*Delegate Director's or Designated Staff Signatu	re (Required) Date	HS/EHS/EHS-CCP (please designate one allocation)			
TO BE REIMBURSED, YOU MUST FOLLO						
The Tuition Reimbursement Program will provide	funds for sta	Iff to assist them in cor	ntinuing their professional growth, which may include under			

graduate and graduate degree programs. This can be used when the staff receives no other funds from any other source, such as government grants and scholarships. Reimbursement shall only be made for course work at accredited colleges, universities and instructional institutions and/or for course work **required** to maintain current licensing or permits as deemed appropriate by the **Agency**. In addition, reimbursement shall only be applicable for the actual cost of the tuition/enrollment, books and other mandatory student fees, not to exceed the current contractual or grant amount per "defined" year. Defined year for Head Start Staff is August 1 through July 31.

Requirements to be eligible for tuition reimbursement:

 Complete and submit this form to your Delegate Director or designee for approval <u>PRIOR</u> to the course start date. Once signatures are acquired, submit a copy to the SETA Fiscal Department. Please note: all pre-approval applications need to have the designated signatures and be submitted to the SETA Fiscal Department PRIOR to the start date of your class.

2. Obtain a grade of C (or equivalent) or better.

3. Within 30 days after completion of pre-approved course(s), submit grades, completed Tuition Reimbursement Form, Statement of Financial Aid, all original receipts (to include receipts for tuition, books, & classroom tools) to Delegate Director or designee for FINAL approval and program allocation.

Once final approval is obtained, either you or designated staff should forward all documents to the SETA Fiscal Department for payment processing.

Checklist (Documents Needed for Reimbursement)				
	Delegate Staff Tuition Reimbursement Form completed and signed by Delegate Director or designee Original receipts for books and materials			
	Original receipt for fee payment OR Account Distribution record OR Student Registration status report marked paid by college Statement of Financial Aid (completed by educational institution)			
	Copy of grade(s) received ("C" or better or equivalent) Transcript showing education status (Head Start Staff: If holding a B.A. /B.S. or higher, classes must relate to Early Childhood Education and/or be required for employment at Head Start, or be related to Head Start content areas.)			
	Required book list for courses For Information or Assistance, Contact SETA Fiscal Department at (916) 263-4107 or (916) 263-1388 Fax (916) 263-6124			

Failure to complete the form in its entirety or missing documentation could result in delay of payment or denial of your request.

FOR SETA OFFICE USE ONLY Cost Center Allocation & Manager's Final Approval:						
<u>REIMBURSEMEN</u>	I <u>T:</u>	Program Year				
Funding Cost Ce	nter (FCC)	(Please specify: HS, EHS, or EHS-CCP)		Amount		
General Ledger#	t: <u>2</u>	0203700				
APPROVED:						
St	aff Manager	Date	Fiscal Supervisor	Date		
	A	vailable Balance				

Updated Delegate Tuition Reimbursement Form - (08/05/2024)