

Reimbursement for Employment related Educational/Professional Course work

1. Date: _____
2. Name: _____
3. Department: _____
4. Position: _____
5. Course Title: _____
6. Institution/School: _____
7. Start Date: _____ 8. Completion Date: _____
9. Please explain how this course relates to your employment with and provides a benefit to Warren County:
- _____
- _____
- _____
- _____
10. Total Cost (attach documents): _____ 11. Total paid as of date: _____: \$ _____
12. Employee Signature: _____ 13. Date: _____

Please submit this form along with the original Warren County Educational Reimbursement Voucher with all required backup to your Department Head.

Approval by Personnel Committee Chair and one of the following: Department Head, Human Resource Director or County Administrator will be required for reimbursement.

APPROVED/DENIED Department Head: _____ Date: _____

APPROVED/DENIED HR Director: _____ Date: _____

APPROVED/DENIED County Administrator: _____ Date: _____

APPROVED/DENIED Personnel Committee Chair: _____ Date: _____

*****Department Head:** is funding available in Department Budget to cover this expense? (YES / NO)

(Reimbursement is subject to review/approval by County Auditor)

HOW TO USE THIS FORM

1. Complete sections 1-12 on the front of this form. Once complete, forward to your Department Head.
2. Department Heads will review request and forward to Human Resources **regardless of whether they approve or deny the request.**
3. Human Resources will review request, **add the Total Paid as of Date and Amount** and forward to the County Administrator **regardless of whether they approve or deny the request.**
4. County Administrator will review request and forward to the Chair of the Personnel Committee **regardless of whether they approve or deny the request.**
5. The Chair of the Personnel Committee will review request and indicate whether they approve or deny the request.

Approval by Personnel Committee Chair and one of the following: Department Head, Human Resource Director or County Administrator will be required for reimbursement. (Resolution 500/2021)

6. If the request is approved and funding is available within the departmental budget to cover the cost, the request will be returned to the Department Head for inclusion in the next available Accounts Payable batch.
7. If the request is approved and there is no funding available within the departmental budget to cover the cost, the County Administrator will include a resolution request on the next Finance Committee agenda for identification of funding. Once the funding is appropriated, the request will be returned to the Department Head for inclusion in the next available Accounts Payable batch.
8. If the request is denied, the request will be returned to the employee with an indication of why the request was denied. The employee has the right to appeal the decision to the Personnel Committee.