

SUBJECT: Educational Assistance

Page 1 of 2

PURPOSE

To provide assistance to employees in their personal development during off duty time.

POLICY

Employees may be reimbursed if a specific course of instruction is related to the employee's work and will be of immediate and specific application in his/her job or if it will be of value to the employee in the foreseeable future in his/her present position or another position in District service. The course must be taken during off hours at a regionally accredited institution acceptable to the District or must be provided by an institution/organization normally used by the District to provide industry-related education/training to its employees.

All courses will be evaluated on a case-by-case basis in accordance with the above criteria, with the exception of academic, non-elective courses that are part of the general degree requirements at an accredited local community college. Because such courses provide fundamental prerequisites for continuing learning, they will be eligible for reimbursement if the community college program will be of value to the employee in the foreseeable future in his/her present position or another position in District service.

Reimbursement up to an annual maximum of \$5,250 will be made for tuition, registration fees, laboratory fees, required textbooks and materials in connection with the course of instruction, pursuant to the relevant provisions of the Local OE3MOU (Article 15.01) or MCP Compensation Schedule (Educational Assistance and Management Allowance). Reimbursement will not be made for mileage to and from the educational institution.

This benefit does not apply to probationary employees under Local OE3 or to MCP staff with less than six (6) months service.

PROCEDURE

1. The employee must complete an Educational Reimbursement Application (ACWD form #125) prior to enrolling in the course, attach a course description and have his/her supervisor and department head review and approve the application. The completed application is sent to the Human Resources Manager for final approval.
2. Human Resources will notify the employee of the status of his/her request as soon as possible.
3. Upon satisfactory completion of the approved course of instruction, the employee will be eligible for reimbursement by submitting official receipts of all covered expenses and a transcript indicating the final course grade of "C" or better, or if a grade is not given, a letter written on official stationery of the educational institution indicating satisfactory completion of the course of instruction.

ALAMEDA COUNTY WATER DISTRICT
ADMINISTRATIVE GUIDELINE

NUMBER
2.3.1

EFFECTIVE: 5/14/96
REVISED: 12/01/21

SUBJECT: Educational Assistance

Page 2 of 2

4. The employee must send a completed Expense Report (Finance form #67) with attached receipts and evidence of satisfactory completion as described above, to the department head and then to Human Resources. Expense Reports will be accepted through June 30, 2014.

Effective July 1, 2014, request for reimbursements shall be submitted electronically through the JD Edwards Expense Management module by attaching receipts and evidence of satisfactory completion as described above.

Department Head and Human Resources will review and approve the expense reimbursement request electronically before it is processed for reimbursement on the next available payroll.

5. Human Resources will review the Expense Report and attachments, make a recommendation, and forward them to the General Manager for final approval.
6. Employees are not eligible for assistance under this administrative procedure if the educational training for which assistance is requested is fully covered from any other sources.
7. Upon termination of employment from the District for any reason other than retirement or disability, the employee shall refund to the District the amount of all payments to or for the benefit of the employee made by the District during the 12 months preceding termination.

RESPONSIBILITY

Employee: It is the responsibility of the employee requesting assistance to follow the provisions of this administrative procedure and process claims in accordance thereto.

District: It is the responsibility of Human Resources to administer the provision of this administrative procedure and to process claims in accordance thereto.

EXHIBITS:

1. Educational Assistance Application

APPROVED:

/s/ ED STEVENSON
Ed Stevenson, General Manager

ALAMEDA COUNTY WATER DISTRICT
EDUCATIONAL ASSISTANCE APPLICATION

Instructions:

1. Complete this Application **PRIOR** to enrolling in the course listed below; attach a course description and have your supervisor complete Section II and your department head complete Section III. **COMPLETE ONE APPLICATION PER COURSE.**
2. Route the completed application to the Human Resources Manager for final approval. You will be notified of the status of your request as soon as possible.
3. After completing the approved course(s), send a completed Expense Report through JD Edwards to Finance **and attach** evidence of satisfactory completion and receipts for tuition-related fees, required books and materials. Department Head and Finance will review and approve the expense reimbursement request electronically before it is processed for reimbursement on the next available payroll.
4. Tuition refunds are limited to reimbursement of your actual costs (not paid by other sources) for tuition and required textbooks and materials.

SECTION I - EMPLOYEE'S APPLICATION/REQUEST

Name: _____ Job Title: _____ Date: _____

I hereby submit the following course or discretionary certification for approval for Educational Assistance:

Institution: _____ Course Title: _____ Instruction Starts: _____ Ends: _____

Tuition: \$ _____ Books/Materials: \$ _____ Lab Fees: \$ _____ Other: \$ _____ (specify)

Attach a course description from the educational institution and briefly describe the course or certification:

Is the educational institution regionally accredited? Yes No If no, please list the accreditation (not required for certification testing): _____

CHECK ONE:

- I believe this course is directly related to my present job and will improve or maintain my present skills or skills required for my current position and/or may qualify me for another job within the District; and/or
- The course applies toward a related degree program:

Describe Degree Program: _____

How will this course or certification help you better perform your current job or assist you in preparing for other jobs in the District?

If this course or certification will help prepare you for other classifications in the District, list them:

Are you eligible for any other educational financial assistance? Explain:

SECTION II - SUPERVISOR'S RECOMMENDATION/APPROVAL

CHECK ONE:

- I believe this course will be of immediate and specific application in his/her job or will be of value to the employee in the foreseeable future in his/her present position.
- I believe this course is indirectly related to the employee's present job however, it may qualify him/her for advancement to another position in District service.
- I believe this course is not related to the employee's present job or to another position in District service and therefore not eligible for reimbursement at this time.

Please describe how the course will or will not benefit the District relative to his/her present position or another position in District service.

Supervisor's Signature: _____ Date: _____

SECTION III - DEPARTMENT HEAD REVIEW/APPROVAL

I have reviewed this request and I agree I disagree with the supervisor's recommendation.

Comments: _____

Department Head Signature: _____ Date: _____

SECTION IV - FINAL APPROVAL BY THE HUMAN RESOURCES MANAGER

- Your proposed course of instruction has direct relationship to the work of the District. In accordance with the existing policy, you will be eligible for reimbursement of the actual costs incurred by you for this specific course.
- Your proposed course of instruction is not related to your present or another job within the District and is not eligible for reimbursement at this time.

(Brief Explanation): _____

Human Resources Manager: _____ Date: _____

Expense Report



NAME _____
 ORG UNIT NO. _____

EMPLOYEE NO. _____
 DEPARTMENT _____

		Travel Expenses									Other Expenses			
Date	Conference Title or Description of Purchase	No. of Miles 99370.1317	Conf. Fee 99370.1317	Airfare 99370.1317	Hotel 99370.1317	Car Rental 99370.1317	Parking 99370.1317	Taxi/Cab Fare 99370.1317	Bridge Toll 99370.1317	Meals M&IE Rate 99370.1317	Dues 99390.1317	Education 98880.1317	Other	Acct./Job No.
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														
15														
16														
17														
18														
TOTALS		0.00									0.00	\$0.00	\$0.00	

Latest form can be found on the intranet in the Form section under Finance available through June 30, 2014. Effective July 1, 2014, request for reimbursements will be submitted electronically through the JD Edwards Expense Management module.

MEALS & INCIDENTALS FOR OVERNIGHT TRAVEL: Maximum Per Diem Allowance per day is based on Federal Meals and Incidentals Expense (M&IE) Rate by the destination city. For the day travel begins and ends, the employee will be allowed 75% of the M&IE Rate for each of those days. Meals provided at the event and taken by the employee are excluded from reimbursement. Employee can only claim reimbursement for additional meals taken that have not been provided at the event. Refer to Request for Travel Authorization Form for your daily M&IE Rate. Receipts are not required.

ONE-DAY TRAVEL: Meals will be reimbursed on the actual cost with a maximum up to the Standard Meal Allowance based upon the M&IE rate breakdown by destination city. Receipts are required. See table for breakdown.

Eff. Nov. 1, 2012 - Please see Guidelines 3.1.2 for further information

BOARD OF DIRECTORS: Meals will be reimbursed on the actual cost. Receipts are required.

Summary of Expenses

TOTAL MILEAGE eff. Jan, 1, 2013 at \$0.565/mile	\$0.00
TOTAL EXPENSES	\$0.00
LESS CASH ADVANCE 1.2220	
BALANCE DUE TO EMPLOYEE	\$0.00
BALANCE DUE TO DISTRICT	\$0.00

M&IE Total	\$46	\$51	\$56	\$61	\$66	\$71
Continental Breakfast/ Breakfast	\$7	\$8	\$9	\$10	\$11	\$12
Lunch	\$11	\$12	\$13	\$15	\$16	\$18
Dinner	\$23	\$26	\$29	\$31	\$34	\$36
Incidentals	\$5	\$5	\$5	\$5	\$5	\$5
First & Last Day of Travel	\$34.50	\$38.25	\$42	\$45.75	\$49.50	\$53.25

For per diems in US destination cities go to www.gsa.gov/perdiem

Signatures

Employee's Signature _____ Date _____

Supervisor/Division Manager _____ Date _____

Department Head or General Manager _____ Date _____

Human Resources (Ed.Asst. Prgm. Only) _____ Date _____