

**Professional Development for Degree Programs
Tuition Reimbursement Repayment Agreement**

You recently requested approval for tuition reimbursement for a degree program. In accordance with our professional development policy, you must complete the following tuition reimbursement repayment agreement and submit it to your immediate supervisor. You will be informed of a decision on your request by the SOM Human Resource Department within two weeks.

If you have any questions regarding the professional development policy or this agreement, please contact the SOM Human Resource Department.

Course: _____

College/University: _____

City, State: _____

Dates of Attendance: _____ to _____

Total Amount: \$ _____ (includes registration, tuition, fees, required books and other materials to a maximum of \$2,000).

In consideration of payment of these expenses, you agree to the following:

If you voluntarily terminate employment with UCR SOM within one year of the date of reimbursement for the course, you will be required to repay the tuition reimbursed on a prorated basis.

The prorated amount will be based on the total amount of tuition reimbursed by the percentage of time left in months from one year that you did not continue working. For example, if you receive the maximum of \$2,000 for an educational course and work only nine months after completion of the course, you will be required to re-pay 25% of the \$2,000 or \$500 (three months not served divided by 12 months equals 25%).

If any action is brought to enforce any provision of this agreement by UCR SOM, you agree to pay all costs associated with the action as well as any costs of litigation, including all reasonable attorney fees.

This tuition reimbursement repayment agreement creates no contract of employment between you and UCR SOM.

Employee name: _____ Date: _____

Employee signature: _____

Supervisor name: _____ Date: _____

Supervisor signature: _____

Human Resources Director Signature: _____ Date: _____