## SUFFOLK COUNTY COMMUNITY COLLEGE

## **Application For Faculty/Guild Member Tuition Reimbursement**

TO:	Executive Dean,		_ Campus	Date:
FROM:			College ID	No.
	(Faculty/Guild Member)			
	(Address)			
-	eimbursement for the tuition which I plan to register.	on and relate	ed fees for th	e following SCCC
Course(s)		Semester _		_ Credit Hrs
Tuition/Fees	<b>s</b> _\$			
			Signature – Fa	culty/Guild Member
Approved	Disapproved			
Reason:				
	- Data			thus Door
	Date	Si	gnature – Execu	tive Dean

## **Instructions to Faculty/Guild Member**

- 1. Complete this form in duplicate.
- 2. Forward both copies to your Executive Dean. Both copies will be returned to you.
- 3. If approved, complete the registration process.
- 4. At the end of the semester, send one of the original approved copies of this form, a copy of your grade report or transcript, and an expense voucher to your Campus Business Office or to the Central Business Office, as appropriate.

## Notes

- 1. Reimbursement is for tuition and related fees for SCCC courses.
- 2. All full-time and adjunct faculty/guild members are eligible for admission to courses after two semesters of service.
- 3. Maximum reimbursement per semester is for any two courses offered in the College, provided that the faculty/guild member secures prior approval from his or her Executive Dean and successfully completes the course(s).
- 4. Adjunct faculty members are eligible for reimbursement if

They are employed at SCCC concurrent with taking a course,

They are scheduled to teach but are bumped within one week prior to the start of the semester in which they are registered to take a course, or

During the summer, if they were employed in the spring prior thereto.

5. Non-Suffolk County residents are liable for non-resident tuition.