



Graduate Studies – Master’s Degrees and Certifications Employee Tuition Benefit Program Policy

Centenary University offers the following Master’s Degrees and Certifications: Master of Business Administration; Master of Arts in Clinical Counseling; Master of Arts in Counseling, Master of Arts School Counseling; Master of Arts in Education: Educational Leadership; Master of Arts in Education: Instructional Leadership; Master of Arts in Special Education; Master of Education in Educational Practice; Master of Education in Reading; Master of Arts in Leadership and Public Administration; Student Assistance Coordinator certification; Supervisor Licensure and Teacher of Student with Disabilities certification.

To qualify for the Graduate Level Employee Tuition Benefit Program, a Staff member must have successfully passed the ninety (90) day Introductory Evaluation Period. Faculty and Staff must meet the following criteria, as applicable:

1. You must be paid as a full time member of Faculty or staff on the Centenary University payroll.
2. Semesters are: Fall: 9/1-12/31, Spring: 1/1-5/20, Summer I: 5/21-6/30, Summer II: 7/5-8/31.
3. This benefit will apply to a maximum of two (2) courses per semester. Note: Resident Directors are eligible for the number of courses provided in their employment agreements.
4. Because the Adult and Professional Program and online courses of study run on an accelerated cycle, this benefit applies to a maximum of six (6) courses per calendar year, 1/1-12/31.
5. Tuition charge is an 85% discount for Graduate tuition. This discount applies to the current per credit cost. Tuition charge for auditing a course is \$55.00 per credit. Payment of these and any other fees is required of the employee at time of registration. Charges include a non-refundable processing fee of \$25 per credit.
6. The University reserves the right to limit enrollment on a first-come, first-served, budget-available basis.
7. **If there is a prior balance due to Centenary University, Tuition Application may not be approved.**



- 8. **ADJUNCT FACULTY:** Adjunct Faculty are eligible for the Graduate Level Tuition Benefit Program following a semester of Adjunct teaching providing their Adjunct contract is renewed for the upcoming semester. The maximum number of credits permitted is equal to the number of credits taught during the prior semester providing the Adjunct contract is renewed for the upcoming semester for the equivalent number of credits. Copies of signed contracts for the prior semester and the upcoming semester must be attached to this Application at the time it is submitted to the Human Resources Department for approval. Adjunct Faculty are expected to use this benefit within 12 months of teaching a course. The maximum number of courses under this program is 8 per calendar year for which this benefit will apply at a 50% discount of the current tuition charge. Adjunct Faculty are responsible for payment of any applicable fees, including a \$25 per credit non-refundable processing fee due to cancellation or withdrawal.
- 9. All other guidelines from the Employee Tuition Benefit Program Policy & Procedure apply.
- 10. ***Please note that in accordance with Internal Revenue Service (IRS) regulations, gratis Graduate Tuition benefits above \$5,250 in a calendar year must be counted as imputed income for payroll purposes. Imputed income may significantly impact your net pay, based on your current salary and the amount of gratis tuition that you have received above the \$5,250 IRS allowance.***

I HAVE READ AND UNDERSTAND THE ABOVE GUIDELINES AND THE EMPLOYEE TUITION BENEFIT PROGRAM POLICY AND PROCEDURE. I AGREE TO FULLY COMPLY WITH ALL UNIVERSITY REQUIREMENTS.

Employee Signature	Please Print Name	Date
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Employee Tuition Benefit Program
Application for Graduate Level Studies

EMPLOYEE NAME: _____ DEPT: _____

Title: _____ Tel. Ext. _____ Date of Hire: _____

Current Employee Status (check one): Full-time Part-time Adjunct

Scheduled # work hours per week: _____ Months per year (circle one): 9 10 11 12

This tuition request is for (check one):

Fall, 20__ (9/1-12/31) SSI, 20__ (5/21-6/30)

Spring, 20__ (1/1-5/20) SSII, 20__ (7/5-8/31)

Online On Ground Accelerated

Please list below the course(s) you are planning to take. (Note: If you wish to take a course during your work hours, your Supervisor's initials* indicating approval, are required for maximum of one daytime course.)

<u>TITLE OF COURSE</u>	<u># CREDITS</u>	<u>DAY(S) & HOURS</u>	<u>Supervisor's Initials*</u> <u>(If During Work Time)</u>
_____	_____	_____	_____
_____	_____	_____	_____

APPROVED: _____ DATE: _____

Human Resources Director or designee