

Virginia Community College System  
Educational Assistance Request Form

Employee Name	Original Appointment Date	College/System Office
Social Security Number		

Position Title	Section/Division	Teaching Field (For Faculty)

- After Hours Study
- During Hours Study: Note: for classified employees an adjusted work schedule will be attached.
- Leave of Absence With Pay: Promissory Note Must be Completed
- Leave of Absence Without Pay: If educational expenses are being paid, promissory note must be completed.

College/University to be attended \_\_\_\_\_

College Address \_\_\_\_\_

Time study will be pursued \_\_\_\_\_

Course Number	Course Title	Semester Hours*	Start Date	End Date	Tuition Costs	Mandatory Fees
*Limit of 6 credit hours per semester					Sub Total	

Grand Total All Costs	
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**Purpose of Assistance** (Check One)

- Job-Related: Supervisor’s signature verifies that course is related to current position responsibilities
- Degree Requirement: Verification of acceptance into a degree program must be on file

**Payment Option** (Check One) Note that IRS Tax regulations apply

- Reimbursement: Contingent on receipt of a grade of “C” or better and supporting documentation.
- Up-Front Payment: Promissory Note must be completed and attached to this form.

Step 1: \_\_\_\_\_  
Employee Signature \_\_\_\_\_  
Date of Aid Request

Step 2: \_\_\_\_\_  
Supervisor’s Approval \_\_\_\_\_  
Date

Step 3: \_\_\_\_\_  
Review and Approval by President’s Staff \_\_\_\_\_  
Date

Step 4: \_\_\_\_\_  
President’s Approval or Designee \_\_\_\_\_  
Date