UC ANR Staff Assembly Educational Reimbursement Scholarship Application

Please type or print clearly.

Complete both pages of the application form.

Name:_____ Phone: _____

Department:_____ Email: _____

Payroll Title (Career employees only):_____

Date completed probationary period: _____

Provide the following information for each course, seminar, or conference you completed:

Title: _____

Description (you may attach a copy of official program description):

Title: _____

Description (you may attach a copy of official program description):

Date(s) attended: _____

Total Cost of course/seminar/conference:

Note: Travel, food, parking and incidental expenses are not eligible for funding consideration.

Tuition	$_____	
Registration Fee	$_____	
Books	$_____	
Materials	$_____	
Other Expenses	$_____	Specify: _____
TOTAL	$ 0.00	

Total requested for all training combined (not to exceed $499): $ _____

Other funding sources $_____ Specify: _____

Education/Development goals:

- ☐ High School Diploma
- ☐ Certificate Program
- ☐ Associate's Degree
- ☐ Professional Development
- ☐ Bachelor's Degree
- ☐ Master's Degree
- ☐ Ph.D.
- ☐ Other (specify) _____

If applicable, name of degree program of study: _____

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How did this course/seminar/conference assist you in enhancing your current job skills for advancement opportunities or career change within the university system? Be specific and explain the benefit and relationship to your career goals.

What additional development activities/endeavors have you undertaken pertinent to your education or professional goals?

Applicant's signature: _____ Date: _____

Deadline: October 31, 2018 by 5:00 pm

Attach receipts for all eligible paid expenses and proof of successful completion (i.e., grade report, transcript, certificate, etc.) to this application. Applications received without all required documentation will be returned.

Email completed and signed application with documents to slake@ucanr.edu and enspaniel@ucanr.edu