

Tuition Assistance Program Application for Participation

For academic employees seeking their first Master's, Doctoral or Terminal Degree

Form submission deadlines:

For participation beginning Fall semester, application deadline is the **preceding March 1st**.

For participation beginning Spring semester, application deadline is the **preceding September 1st**.

To submit the form, you can either click the icon at the bottom of the form, or send to msue.hr@msu.edu.

* Please note that IE works best for this form

* For additional information, please refer to the **MSU Extension Tuition Assistance Program policy** located on the **MSUE HR web page**: https://www.canr.msu.edu/od/human_resources/professional-development.

Applicant Information:

First Name:

Last Name:

Employee email:

Job Title:

Institute Director:

Institute Director's Email:

Work Location:

District Director:

Degree Program Information:

Degree Type:

Masters:

Doctorate:

Terminal:

Degree Program:

Accredited college or university:

Thesis or plan B paper topic:

Date you plan to initiate your program:

Date you plan to complete your program:

Name of your graduate advisor:

Address:

Phone:

Detailed list of class requirements and a timeline for completion of each.

Description of the degree program for which you have been selected, and why you have selected this program in terms of professional development within existing responsibilities and/or career plans. (Limit comments to 250 words.)

How will you manage your normal job responsibilities while completing course work and writing research and writing your thesis or plan B paper? (Limit comments to 250 words.)

List how MSUE's tuition reimbursement will be utilized throughout program, using cost data appropriate to the granting institution.

List other financial aid or scholarships you have or will receive - not including student loans that you will repay - and expected date(s) those funds will be received.

ACKNOWLEDGEMENTS AND AUTHORIZATIONS

I acknowledge that I have read and understand the MSU Extension Tuition Assistance Program Policy and Procedures. I certify that the information contained in this application is correct.

I acknowledge that I have discussed this program with my District Director and Institute Director and both have agreed to the pursuit of a this degree relevant to my Extension work.

I have been accepted by the accredited institution listed above for the degree program cited, and am including proof of my acceptance. ***Attach proof of acceptance in email to MSUE HR.***

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For use by MSU Extension HR Only

Institute Director Comments:

Extension HR Comments:

Approvals:

ID

DIR

EHR