EMPLOYEE EDUCATION PROGRAM (EEP) APPLICATION: Non-Degree Courses at the School of Professional Studies

Section 1: Employee Information	Section 1: Employee Information						
Supervisor's Name	· · · · · · · · · · · · · · · · · · ·		Workday ID		Hire Date	<u> </u>	
Email Address Course Name Course Name Start Date Date (Tuition C 1. 2. 3. *The IRS allows employers to provide 55,250 in tax-free tuition each calendar year. Employees will be taxed in compliance with IRS regulations on tuition exceeds the IRS limit. University Human Resources (UHR) will notify and work with each applicant to set up a tax schedule. Section 3: Read and Initial I acknowledge that I am responsible to notify Brown University UHR and the School of Professional Studies if I wish to cancel enrollment no later than 14 days prior to the course start date. If a cancellation is made after the course start date(s), I acknowledge that the full cost of tuition for the course(s) must be reimbursed back to the University. Employee Initial Read and Sign Sa a participant in Brown University EEP program/gloidelines. I understand that if I terminate from Brown University for reasons other than adoption to the end date of my Brown course or should not successfully complete my course(s), I will be responsible to prays Brown University to deduct from my last paycheck(s) the entire amount of money owed. If here are insufficient funds to cover the balance of tuition, I will make arrangements to repay Brown University. I certify that I have answere he above questions accurately. Employee Signature Date Date	Limployee Name (Last Name, First Name)		WOI Kuay ID		Inite Date	-	
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	Employee Signature			Date			
Submit completed applications to:			п				

Date _



UHR Approval



Email: educational_benefits@brown.edu

Mail: EEP, Box 1879