

Tuition Loan Repayment Application – Professional Psychiatrists

Personal Information									
Department Na	ent Name Employee ID		Last Name, First Name Contact Phone No		er Email Address				
Mailing Address			City	State	Zip				
Job Code Title			Are you participating in another How much eligible loan repayment program			rogram tuition			
			tuition repayment program?						
			☐ Yes ☐ No \$						
Lender Informa	ation								
Name Ma		Mailin	g Address	City	State	Zip			
Name Mailir		Mailin	g Address City		State	Zip			
Employee Certi	ification:								
I understand that									
 The Tuition 	on (student) I	Loan Repaymen	nt Program provides reimbursement of e	employee's student loan oblig	ations on an	annual basis in			
accordan	ice with the p	rovisions outlin	ed in your applicable Memorandum of	Understanding (MOU). Reimb	ursement is f	for tuition paid			
for emplo	oyee only (de	pendent loans	do not qualify).						
 The stude 	ent loan repay	ment is a taxable	e benefit and will be added to my taxable	gross income.					
·			loan repayment program. Loan forgivene	ss programs are not considere	drepayment				
programs	s for purposes	of the Tuition L	oan Repayment Program.						
			ation in accordance with the provisions out	tlined in my MOU and supportir	g documenta	tion			
		proval of my re	· · ·						
			cal year in accordance with the amounts an						
	will be issued	within thirty (30)	days from the date Employee Benefits and	Services Division (EBSD) approv	ed your reque	st.			
I certifythat:									
I have completed my degree for which I am requesting tuition repayment.									
 I am in active repayment status for my student loan and I am not in default status. I am not participating in another tuition loan repayment program. 									
			· · · · · · · · · · · · · · · · · · ·						
			n the County to pay for the degree for whi		ment.				
		bove is true and	oaid for completion of my degree and not t	inat or a dependent.					
*Please see Application Requirements on page 2 for more information									
Employee (Print & Sign)						Date			
This document/form incorporates use of e-signature(s) in accordance with the San Bernardino County Policy #03-12 and						Standard Practice 1.			
Appointing Aut			hority (Print & Sign)		Date				
			HR Office Use Only						
			HRBP Validation						
Yes No	Is employee in a regular position and scheduled for at least 80 hours per pp?				HRBP EE ID:				
☐ Yes ☐ No	Is employee in paid status? HRBP Initial:								
☐ Yes ☐ No		Was employee's last WPE a meets standards or above? Is employee on a current work performance improvement plan? Date:							
☐ Yes ☐ No	Is employee on a current work performance improvement plan? Is employee on a current leave restriction plan?								
☐ Yes ☐ No	is employee (on a current leave	Benefits Validation						
Voc Na	Did omnia.	a receive a lunia D		T	EDCD FF ID:				
☐ Yes ☐ No	Did employee receive a Juris Doctorate degree? EBSD EE ID: FROD Leitiel.								
☐ Yes ☐ No☐ Yes ☐ No	Does employee have a valid, unrestricted license to practice psychiatry in the state of California? Le student long qualifying? EBSD Initial:								
Yes No	Is student loan qualifying? Is student loan in good standing? Approved Denied					Denied			
Yes No Is student loan in good standing? Approved \$1,000 \$1,500 \$2,000 Eligible payment amount based on continuous years of service? Date:						Defiled			
\$1,000\$1,50 \$2,500	□ \$3,000 □ \$3,000	- 10 Sie Paymen	cambane dated on continuous years of servi						

Distribution: Original-Department HRBP

Tuition Loan Repayment Application Requirements

Submit original completed Tuition Loan Repayment Application and supporting documentation to the assigned Human Resources Business Partner (HRBP). If you are unsure who the assigned HRBP is, please call (909) 387-5570.

Failure to provide the supporting documentation as outlined below will result in denial of your request. Please refer to your Memorandum of Understanding (MOU) for detailed information on the Tuition Loan Repayment Program provisions.

Claims Payment:

Employee must complete an application and submit supporting documentation for each disbursement of loan repayment.

Award amounts are set per year and payment shall not exceed the maximum award amount per year. Eligibility for award is based on two or more continuous years of service with the County. Continuous service is defined as the total length of service employee's date of hire in a regular position with no separation from the County.

Award amounts per year and qualifying years of service are outlined in the table below. For County employees who are currently employed in a regular full time Psychiatrist classification in the Professional Unit, year one will become effective July 1, 2020. For County Employees hired into the bargaining unit after July 1, 2020, year one will be the date the employee entered into a Psychiatrist classification in the Professional Unit.

Award amount per year effective July 1, 2020	Payment	Qualifying Years of Service
1	\$1,000	2 years of continuous service with the County
2	\$1,500	3 years of continuous service with the County
3	\$2,000	4 years of continuous service with the County
4	\$2,500	5 years of continuous service with the County
5	\$3,000	6 years of continuous service with the County

Required Documentation:

Proof of valid licensure for your position. License must be unrestricted.

Proof of qualifying degree. Qualifying degree is a Doctorate degree.

Statement(s) from student loan lender that demonstrate the following:

- Loan is in good standing and not in default status.
- Proof of loan payments for the period of time in which reimbursement is being requested.