

# **Tuition Assistance Program**

A NJCF program offering financial assistance to those NJCMA Club employees who are paid hourly, do not receive reimbursement from their club for education classes, and whose classes pertain to their current job and career enhancement.

## **Criteria for applying:**

- The applicant must be an employee-that does not receive reimbursement from their club for education.
- Employee must have worked a minimum of 1,000 hours in the past year;
- Coursework must be work-related; classes must be deemed pertinent to the employees work at the Club by the Tuition Assistance Program (TAP) Committee;
- Eligible classes are those that enhance job performance and/or lead to a better job opportunity at that Club;
- Tuition Assistance is awarded in advance of or during course work; completed courses do not qualify;
- Students awarded NJCF Scholarship monies are not eligible to apply for the TAP within one year of being awarded a scholarship.

## **Other Information:**

- Each Club may receive up to \$3,000 in grants per calendar year; grants are applied in the year that the course is taken. In the case of an overlap in the year (i.e. from 12/15 to 1/15), the grant is documented in the year the course begins, not when it ends;
- The same person can receive two grants in the same year;
- NJCF provides funding for a maximum of \$15,000 per year;
- Grants are generally paid directly to the educational institution.

## **Application Process:**

The Tuition Assistance Program application should be mailed to:

Ms. Debbie Pagerie Chairman, NJCF Tuition Assistance Program Indian Trail Club 830 Franklin Lake Road Franklin Lakes, NJ 07417

The application must include documentation of the course the employee plans to take and cost associated with that course, a support letter from the applicant's supervisor (immediate or otherwise), and a brief letter of intent from the applicant as to why he/she wants to take the selected course, and how it will benefit them and their work at the Club.

**Questions:** Questions regarding this program should be directed to the Chairperson: Ms. Debbie Pagerie at 201-891-480 x629 or dpagerie@indiantrailclub.com.

#### New Jersey Club Foundation Tuition Assistance Program Application

Employee's Name:			
	(Last)	(First)	(Middle Initial)
Permanent Mailing Add	'ess:	Phone:	
		E-mail Address:	
Social Security #:			

NJCMA Club name:	

Position:	Date of employment (mo/yr)	
	from:	to

List school at which course will be attended:		
School:		Fee:
Course:		
Applicant Signature:		Date:
Attach a copy of the registration form from school.		

## EMPLOYER SECTION (please check each item)

Please Verify:

- Employee does not receive reimbursement for education from the club
- \_\_\_\_\_ Application is signed by the club's NJCMA member.
- \_\_\_\_ Applicant has worked a minimum of one thousand hours during the past year.

#### **EMPLOYEE SECTION** (please check each item)

Please verify that the following items are included:

- Written letter of intent stating why the selected course was chosen and how it will enhance your work at the club.
- \_\_\_\_\_ Attached support letter from your supervisor.
- \_\_\_\_ Attached documentation of the course and the associated cost.
- \_\_\_\_ Attached proof of payment if course has begun.

Supervisor's Name:	
Club Name:	
Address:	
Phone #:	
E-mail:	
Supervisor's Signature:	
NJCMA Member Signature:	