

**CITY OF HICKORY
TUITION ASSISTANCE PROGRAM
REFUND REQUEST**

NAME: _____

(Please print)

DEPARTMENT: _____

DATE: _____

Your application for participating in the City of Hickory's Tuition Assistance Program has been approved. When you qualify for a refund, please attach documentation showing you have satisfactorily completed the course(s) under the rules of the Tuition Assistance Program.

ITEMIZED EXPENSES

| Course Title | Reg. Fees | Tuition | Other Fees | Total |
|--------------|-----------|---------|-----------------|-------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Subtotal | |
| | | | Tax | |
| | | | TOTAL | |

Total amount to be refunded by the rules of the Tuition Assistance Program: _____

Requested: _____

Employee Signature

Date

Approved: _____

Department Head

Date

Vendor # _____ Dept. Acct. # _____ - _____ -10.04
(Finance will complete) (Department will complete)

NOTE

I, _____ (Employee's Name), for value received, being money reimbursed by the City of Hickory to me as part of the Tuition Assistance Program, do promise to pay to the City of Hickory the Sum of _____ Dollars.

This note is executed upon the condition and reservation that one-third of the amount of this note shall be credited as paid at the end of one year's service in my employment with the City of Hickory following completion of the training program for which tuition is being reimbursed; another one-third of said principal shall be credited as paid following the end of two years of such service; and the final one-third balance will be credited as paid, and this note declared paid in full at the end of three years of such service. I do further agree that in the event I leave the service of the City of Hickory, either voluntarily or upon my being dismissed, the balance then owing on said note shall immediately become due and payable, and the City of Hickory shall have the right to credit on the balance of this note any amount owed to me by the City of Hickory for salary or wages at the time of such termination or dismissal.

This note shall not bear any interest while I am employed by the City of Hickory and shall bear interest beginning upon termination at the then legal rate.

IN WITNESS WHEREOF, I have set my hand and seal this _____ day of _____, 20__.

Employee Signature

Witness:

Notary Public

My Commission Expires _____