## TRAINING COST/REIMBURSEMENT POLICY

[Organization Name] believes in providing continuous education and professional development opportunities to our staff members so they may update their knowledge and skills. This policy is intended to set guidelines that are consistent and fair to all parties regarding who is responsible for covering the costs of employee training, and in what amounts.

SCOPE

This policy applies to all employees who are enrolled in staff professional development or certification training that is paid for by [Organization Name].

POLICY

[Organization Name] wishes to provide opportunity for employee advancement through the provision of training courses. [Organization Name] is so committed to advancing the credentials of our employees that we are willing to pay for employee training. However, employees who take advantage of this employee perk are expected to remain as employees of [Organization Name] for a reasonable period of time after they complete their training, so that [Organization Name] also benefits from its investment into the upgraded knowledge and credentials of its employees.

[Organization Name] will pay to have employees enrolled in the following types of training or courses:

* Insert types of courses you will cover
* Additional courses not listed, subject to the approval of [insert title]

Employees who wish to enroll in training must put their best effort forward, and work diligently to pass their courses. They must also understand that in order for [Organization Name] to cover the cost of training, employees must remain employees of [Organization Name] for long enough to impart the skills and knowledge they have acquired through their course work.

As such, employees understand they will be responsible to reimburse [Organization Name] in full for the costs associated with this program if:

1. They do not pass the courses [Organization Name] has paid for.
2. They do not remain as an employee of [Organization Name] for at least one (1) year after the completion of the program.

PROCEDURE

Employees who wish to take an approved training course are asked to notify [Insert appropriate party].

If approved, [Organization Name] will foot the bill to have the employee enrolled and provide the employee with the details of the learning session to the employee.

[INSERT ANY OTHER DETAILS OF YOUR PROCEDURE]

ACKNOWLEDGEMENT AND AGREEMENT

I, the undersigned, understand and acknowledge that [Organization Name] will only cover the cost of my training if I pass my course or certification *and* remain an employee of [Organization Name] for a duration of at least one year after I have been certified.

Further, I acknowledge and agree that I will be required to repay [Organization Name] in full for the cost of my training courses if I do not pass the courses and/or if I do not remain an employee for at least one year post certification.

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_