

Request for FSA Academic Enrichment Award
Provost's Office
SUNY Maritime College

SUNY Maritime provides Academic Enrichment Awards for faculty and administrators to attend certificate and degree seeking educational programs. Such programs include master's and doctor's degrees, and certification programs directed related to the faculty or staff member's role at SUNY Maritime College. Funds are limited and only awarded to full-time employees. Budgets change and therefore the receiving an award does not guarantee funding in the future. Funds will not be provided as a reimbursement for expenses that were not previously approved. Awards are only made for part-time study.

As a general policy, the College will pay the tuition for faculty and staff at an accredited institution of higher education. Travel, books and other expenses beyond tuition are not reimbursed. Normally, only one course per academic term will be approved. To receive the award, the faculty/staff member must earn a B or better. Reimbursement will be made when an official grade report is submitted to the Provost.

Academic Enrichment awards are intended to advance the career of a Maritime employee at Maritime College. Awards are not intended to help prepare an employee to secure another job outside of the College. In an effort connect an award to the immediate future of the College; any employee who obtains an Academic Enrichment Award agrees to remain at the College for at least one year from the date the award is made. If the award recipient voluntarily leaves the College less than 365 days from the date the award is made, the employee must reimburse the College for the amount of the award.

Complete this form and return it to the Provost's Office. Use extra space as necessary.

Your Name

Title

Contact Information

Educational institution the employee plans to enroll.

Dates of enrollment covered by this application (i.e., for the Fall Semester 2013)

How will this travel benefit you in your job?

(Continued on back)

Your signature

Date:

Department Chair's Approval Signature

Date:

Provost

Date:

VP Finance and Administration

Date:

FSA ONLY

BUDGET ALLOCATED	\$
YEAR TO DATE ACCT BALANCE	\$
AMOUNT REQUESTED	\$
REMAINING BALANCE	\$