



TEXAS SOUTHERN UNIVERSITY
MANUAL OF ADMINISTRATIVE POLICIES AND PROCEDURES

SECTION: Human Resources
AREA: Benefits

Policy 02.03.05

SUBJECT: Educational Opportunities

I. PURPOSE AND SCOPE

This policy has been established to provide educational opportunities to all full-time, benefits-eligible employees to encourage their development through formal education. To participate, employees must have completed at least six (6) months of employment.

II. POLICY PROVISIONS

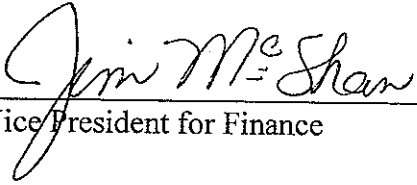
- A. Under limited circumstances, employees may enroll in college courses at TSU during regular business hours. Request to take courses at other college campuses may also be considered.
- B. Prior to registering for a class during work hours, an employee must obtain written approval from their immediate supervisor and must also notify the Office of Human Resources. The employee is required to complete the Request for Educational Opportunity form and submit a copy both to their immediate supervisor and to the Office of Human Resources (See Addendum A).
- C. Courses may be job-related, degree-related or for TSU career development. Each employee is limited to a maximum of three (3) hours per week for course attendance. The employee is required to make up all work hours missed prior to the end of each pay period. Time off for course attendance will not be charged to vacation or sick leave. Any time not made up by the employee by the end of the pay period will be subject to salary deductions. Under this program, the employee is solely responsible for all costs of course enrollment, including tuition, books, supplies, and other costs associated with the course.

III. REVIEW AND RESPONSIBILITIES

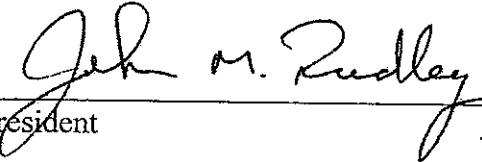
Responsible Party: Executive Director of Human Resources *(Signature) 6/17/09*

Review: Every three years, on or before September 1

VI. APPROVAL



Vice President for Finance



President

Effective Date: 06/24/09

Addendum A

Request for Educational Opportunity

Date _____

Employee Name _____

Employee Job Title _____

Department _____ Campus Phone _____

PROPOSED CLASS SCHEDULE

<i>CLASS TITLE</i>	<i># OF CREDIT HRS.</i>	<i>TIME</i>	<i>LOCATION</i>

Certification and Approvals:

Employee: _____ Date _____

Supervisor: _____ Date _____

Human Resources: _____ Date _____