

**COMMUNITY COLLEGE SYSTEM OF NEW HAMPSHIRE  
TUITION REIMBURSEMENT AGREEMENT**

AGREEMENT dated this \_\_\_\_\_ day of \_\_\_\_\_ by and through the Community College System of New Hampshire (hereinafter referred to as CCSNH) and \_\_\_\_\_ (Name and Title of Recipient) Address: \_\_\_\_\_ (Heretoeafter referred to as the Recipient).

The CCSNH and the Recipient do hereby mutually agree as follows: The CCSNH shall pay to the Recipient the sum of \_\_\_\_\_ for the reimbursement of tuition costs upon satisfactory completion and proof of paid tuition for the following credit course taken at

\_\_\_\_\_

(Name of Institution and Address)

<u>Course Name</u>	<u>Course #</u>	<u>Section</u>	<u>Start Date</u>	<u>End Date</u>	<u>Credit Hours</u>
_____	_____	_____	_____	_____	_____

This agreement is contingent upon approval by signature of the Recipient and the Institution's Appointing Authority. The following conditions are set forth by this agreement.

1. Unless indicated by an "X" in the box below, no work time is involved in the requested activity.  
 A. The course is not offered during non duty hours and time off or an adjusted work schedule has been approved by the Recipient's supervisor. For approved adjusted work schedules, the Recipient shall be required to make up work time during the designed pay week.
2. The Recipient shall be required to complete and achieve a grade of "C" or better for undergraduate coursework and a grade of "B" or better for graduate coursework. In cases where the grading system is Pass/Fail, Unsatisfactory/Satisfactory, etc., the Recipient must receive the grade that gives credit for the course.
3. Upon a satisfactory completion of the course named above, the Recipient shall continue in the employ of the CCSNH in his/her current position (or in such other position, at equal or greater compensation, to which he/she may be assigned) for a period of six months.
4. Should the Recipient breach any of the conditions set forth in paragraph 3, the Recipient shall pay to the CCSNH a sum equal to all monies previously paid by the CCSNH to the Recipient pursuant to this Agreement, provided, however, that the Recipient shall receive a credit for each month in which he/she is employed by the CCSNH subsequent to the date upon which the named courses are satisfactorily complete, the value of said credit to be calculated on a pro rata basis.
5. The Recipient shall not raise any set off or counterclaim against the CCSNH in any action brought by the CCSNH to collect any amount due under this agreement.
6. Should any amount be found to be due the CCSNH in any action brought against the Recipient pursuant to this agreement, the CCSNH shall, in addition to said amount, be entitled to an award of costs and a reasonable amount of attorneys' fees.

Recipient Signature  
\_\_\_\_\_

State of New Hampshire  
County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

\_\_\_\_\_ (Name of Recipient) personally appeared before me, the undersigned officer, and subscribed to the within instrument and acknowledged that s/he executed the same for the purposes herein contained.

In witness whereof I hereunto set my hand and official seal:

\_\_\_\_\_, Notary Public/Justice of the Peace

Commission Expires On: \_\_\_\_\_

\_\_\_\_\_, CCSNH/College Appointing Authority

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