


AUSTIN PEAY STATE UNIVERSITY
POLICIES AND PROCEDURES MANUAL

Policy Number: 5:001	Supersedes Policy Number: 5:001
Date: April 25, 1988	Dated: May 1, 1987
Subject: Scholarship Program for Employees	
Initiating Authority: Vice President for Finance and Administration	SBR Policy/Guideline Reference: 5:01:04:00 P-075, P-070
Approved:  President	

Austin Peay State University is committed to the need for the continued professional growth and development of faculty and staff. It considers support for educational expenses of personnel as an important vehicle for addressing that need. This program is available subject to the funds being budgeted and available.

Types of Support for Educational Expenses

There are five (5) programs by which Austin Peay State University may provide for faculty and staff support for personnel to further their formal education under SBR Policy No. 5:01:04:00, SBR Guidelines P-070 and P-075. The programs are:

(1) Faculty or Professional Staff Grant-in-Aid Programs

This program is designed to provide tuition or maintenance fees and/or living allowance for an individual who - on an approved leave of absence - is enrolled on a full-time basis in credit courses. (Use SBR Form P-070-1 and SBR P-070-3.)

(2) Faculty or Professional Staff Tuition or Maintenance Fee Reimbursement Program

This program is designed to provide tuition or maintenance fees only for an individual who takes credit courses on a part-time basis - either at Austin Peay State University or at another institution - while continuing work responsibilities at Austin Peay State University. (Use SBR Form P-070-2.)

(3) Faculty or Professional Staff Audit Program

This program is designed to provide tuition or maintenance fees only for an individual who takes courses on an audit basis at Austin Peay State University. (Use PPM Form 5:001:b.)

(4) Clerical and Support Staff Maintenance Fee Payment Program

This program is designed to provide maintenance fee payment only for an individual who takes credit courses in a degree program or non-credit courses that are directly job related and who takes the courses at Austin Peay State University. (Use PPM Form 5:001:a.)

(5) Faculty, Administrators, and Support Staff Fees Waiver at any Tennessee Public Postsecondary Institution. (PC 191)

This program is designed to provide fees waiver for all full-time employees at Austin Peay State University to enroll in one course per term, on a space available basis, at any Tennessee public postsecondary institution. (Use PC 191 Form.)

All application forms may be obtained from the APSU Personnel Office.

(1) FACULTY OR PROFESSIONAL STAFF GRANT-IN-AID PROGRAM

Eligibility

Any full-time faculty member or administrator at Austin Peay State University who has been employed by the institution for two or more years may, at the request of the President, be eligible for receipt of a grant-in-aid award.

Criteria for Selection

The grant-in-aid - which is intended to serve as a means of institutional development as well as individual professional development - shall be awarded on the basis of demonstrated need for further academic development which will ultimately benefit the institution, with written justification submitted to the Chancellor by the President of Austin Peay State University.

Grant-in-aid shall be available to all eligible faculty and administrators whose proposed courses of study will, in the judgment of the President, enhance the value of the employee to the institution. The following list suggests types of support which would enhance the employee's value to the institution: support for persons working toward the doctorate or their terminal degrees, support for persons pursuing degrees below the

doctorate in a technical or professional discipline, or support for personnel training or retraining so as to enhance their expertise. All grant-in-aid should be recommended on the basis of the following:

- (a) requests for minority and female personnel,
- (b) requests for tenured faculty,
- (c) requests for tenured/non-tenured personnel of departments in which the institution desires further development.

Level of Support

Faculty and administrative personnel who have made successful application for grant-in-aid may be compensated with institutional funds for tuition-related fees and monthly living allowances in accordance with the following provisions:

- a. Reimbursement of tuition-related fees may not exceed actual maintenance fees or tuition. Tuition-related fees may include maintenance fees, tuition, debt service fees, service charges and incidental fees payable at the time of registration, but shall not include room, board, and supplies.
- b. Monthly living allowances may not exceed 50% of the grantee's monthly salary. Academic year salaries are to be divided by nine to derive an equated monthly salary rate. Total living allowances for the maximum twelve-month grant period may not exceed \$11,000.

Stipulations

The conditions of a grant-in-aid shall comply with the following minimum requirements:

- a. The recipient shall be required to return and be employed by Austin Peay State University for not less than three months of full-time employment for each month of grant-in-aid awarded. Repayment of time shall commence immediately after completion of the period of study or as determined by the President.
- b. Failure on the part of the recipient to remain employed for the period of time agreed upon in the contract shall result in a financial obligation to Austin Peay State University based upon the terms of the contract.
- c. Summer or short-term employment shall be considered part-time employment in cases where the employee holds an academic year appointment. No part-time employment shall be creditable toward the fulfillment of the employment conditions of the contract.

- d. No grant-in-aid shall be awarded for a period longer than twelve (12) months.
- e. In general, a full grant-in-aid will be awarded to an individual on a one-time basis.
- f. Grant recipients must enroll as a full-time student during the grant period.
- g. All stipends from other sources received by the recipient during the grant period are subject to the review of both the President and the Chancellor.
- h. If the program objectives are not achieved by the end of the designated period, the institution may grant a leave of absence for a maximum of an additional twelve-month period. A second grant-in-aid may only be awarded after the recipient has fulfilled the return employment commitment of the first award.

Deadline for Submission

Requests for grants-in-aid shall be submitted (using the form obtained from the personnel office) to the Chancellor for approval no later than March 1 for the ensuing year. After approval, the institution may issue and execute the contract stating to the recipient the conditions under which the grant-in-aid is awarded (using the form found in the personnel office). A copy of the executed contract shall be filed with the Chancellor prior to June 30 of the same calendar year.

Additional Note

- a. The number of grants-in-aid at Austin Peay State University shall not exceed three percent (3%) of the number of full-time faculty and administrators at the institution at the time the awards are requested.
- b. In addition to these guidelines concerning grant-in-aid recommendations, complete materials supporting the individuals' requests will be maintained on campus in the supervisor's office. Each grant recipient is required to provide the President with official grade reports during and upon completion of the grant period.

(2) FACULTY OR PROFESSIONAL STAFF TUITION OR MAINTENANCE FEE REIMBURSEMENT PROGRAM

Eligibility

- a. Any full-time faculty member or professional staff member at Austin Peay State University who has been

employed by the institution for at least six months may, at the request of the President, be eligible to participate.

- b. Employees who retire at a minimum age of 60 with at least 10 years of service, or with 30 years of service regardless of age maintain eligibility under this program.

Criteria for Selection

Same as for Faculty or Professional Staff Grant-in-Aid Program.

Level of Support

Reimbursement may not exceed actual maintenance fees or tuition for a maximum of six credit hours per semester or quarter. This maximum does not apply to summer study.

Stipulations

- a. The recipient, unless retired, shall be required, after completion of the course or courses, to be employed by the institution for not less than one (1) month of full-time employment for each month of the term of participation in the Faculty or Professional Staff Tuition Reimbursement Program.
- b. Satisfactory completion of coursework must be demonstrated to receive reimbursement and to remain eligible for additional assistance. Institutions may provide reimbursement at the time fees are due; however, it is the obligation of the recipient to repay them if coursework is not satisfactorily completed.
- c. Courses should be scheduled in counsel with supervisors to assure maintenance of optimum job performance. Courses should be scheduled at times other than during regularly scheduled work assignments unless make-up time is scheduled.

Deadline for Submission

Recommendations for Faculty or Professional Staff Tuition or Maintenance Fee Reimbursement Program may be submitted by the President to the Chancellor prior to each academic term, using the specified form obtained from the personnel office. A separate contract is not necessary.

Additional Note

Complete materials supporting the individuals' requests will be maintained on campus. Each recipient is required to provide

the President with affirmed grade reports for the course(s) taken.

(3) FACULTY OR PROFESSIONAL STAFF AUDIT PROGRAM

Eligibility

- a. Any full-time faculty member or professional staff member at Austin Peay State University who has been employed by the institution for at least six months is eligible - with the approval of the President - to participate.
- b. Employees who retire at a minimum age of 60 with at least 10 years of service, or with 30 years of service regardless of age, maintain eligibility under this program.

Criteria for Selection

Any individual who meets the eligibility criteria may continue to develop his or her skills and knowledge through participation in educational programs that are available on a formal and organized basis.

Level of Support

The faculty or staff member may request sponsorship from his or her department or administrative unit for support not to exceed the maintenance fees for coursework taken.

Stipulations

- a. All such audits must be accomplished at APSU. Faculty and administrators requesting support must meet the requirements for admission and are subject to institutional regulations and academic procedures.
- b. Faculty and professional staff, in counsel with their immediate supervisors, should limit the number of courses audited so as to maintain an optimum level of job performance.
- c. Course enrollment will be permitted on a "space available" basis.

Deadline for Submission

Requests may be submitted prior to each academic term. After the faculty and professional staff have made application and received final acceptance, they must submit the request to their supervisor two weeks prior to registration.

(4) CLERICAL AND SUPPORTING STAFF MAINTENANCE FEE PAYMENT PROGRAM

Eligibility

- a. This program is available to all full-time clerical and supporting staff members who have been employed by the institution for at least six months. Staff members shall be defined as not including faculty, administrators, graduate assistants, post-doctoral fellows, or personnel holding faculty rank or status. All nonexempt-classified employees are eligible to utilize this program.
- b. Employees who retire at a minimum age of 60 with at least 10 years of service, or with 30 years of service regardless of age, maintain eligibility under this program.

Criteria for Selection

This program has as its general goal to encourage staff members to develop their skills and knowledge through participation in educational programs while maintaining an optimum level of job performance.

Level of Support

Payment by the institution will be restricted to an amount no greater than the established resident maintenance fee for six (6) credit hours per term. If the employee chooses to take a course using PC 191, the institution will still support six (6) credit hours under the Staff Maintenance Fee Program. The personnel will be responsible for application fee and required deposits, laboratory fees, etc.

Stipulations

1. All formal academic courses must be taken only at Austin Peay State University. Personnel must meet the requirements for admission and are subject to institutional regulations and academic procedures.
2. Courses must be for credit in a degree program excepting non-credit courses directly job related as certified by the supervisor. Staff members, in counsel with their supervisors, should limit the number of credit hours in which they enroll so as to maintain an optimum level of job performance.
3. Courses should be scheduled at times other than during regularly scheduled work assignments unless make-up time is scheduled. Make-up time is defined as the use of compensatory time, annual leave, or an extension of the

work day by thirty minutes all subject to the approval of the supervisor, in consultation with the employee, and subject to final approval of the senior administrator of the division. The normal working period is considered to be the hours between the time that an employee is scheduled to begin work and the time that the employee is scheduled to leave. The lunch hour is an hour's break that begins and ends within 3 to 5 hours after the onset of the working day. An employee's lunch hour is scheduled by the supervisor, in consultation with the employee, and subject to final approval of the senior administrator of the division. The lunch hour is not considered a normal working hour.

4. Participants must complete with passing grades all courses in which they enroll under this program in order to take subsequent courses in this program. Exceptions will be made only in cases where a physician has certified failure for health reasons or when the employee has paid for and completed at least two courses since having failed to complete a course taken at institutional expense.
5. After the employee has made application and received final acceptance, the employee must submit the request to his or her supervisor two weeks prior to registration.

Deadline for Submission

Employees must submit the request to his or her supervisor two weeks prior to registration.

Additional Note

It is required that complete materials supporting individuals' requests be maintained on campus. Each recipient is required to provide the supervisor with affirmed grade reports for the course(s) taken.

(5) FACULTY, ADMINISTRATORS AND SUPPORT STAFF FEES WAIVER AT ANY TENNESSEE PUBLIC POSTSECONDARY INSTITUTION (PC-191)

Eligibility

All full-time Austin Peay State University employees (faculty, administrators, and support staff) are eligible to participate in one (1) course per term on a space available basis at any SBR or UT system institution. Personnel must meet the requirements for admission and are subject to regulations of the institutions offering the courses.

Level of Support

Payment by the institution will cover tuition charges, maintenance fees, student activity fees, and registration fees. Employees, however, are responsible for specific course fees, including laboratory fees, and the costs of books and supplies.

Stipulation

- a. An employee must receive approval from his or her immediate supervisor prior to registering for a course, using form P-075-1, which is available in the Personnel Office, and other forms (PC-191) as required by campus policy.
- b. This form must be approved by the Personnel Office and the immediate supervisor at least two weeks prior to normal registration.
- c. All courses must be credit courses.
- d. Employees must request annual leave to attend courses during work hours.
- e. An employee may register for a course by presentation of a fully executed P-075-1 form only after the formal registration period. The employee may officially enroll in the class only after it has been determined that sufficient enrollment exists to offer the course and that space is available. An employee may be dropped from the course in the event that the course becomes full with fee-paying students during late registration.
- f. These regulations shall have no effect on the existing faculty and staff development programs.
- g. A passing grade must be achieved in order for an employee to continue taking courses in this program. If an individual should fail a course, he or she must pass two courses at the level of the failed course before becoming eligible to continue this program.

Additional Note

Complete material supporting individual requests must be maintained by the supervisor. Each recipient must supply the supervisor with affirmed grade reports for the courses taken prior to the next official registration.

STATE BOARD OF REGENTS
FACULTY OR PROFESSIONAL STAFF GRANT-IN-AID PROGRAM
RECOMMENDATION FORM

This program is designed to provide tuition or maintenance fees and/or living allowance for an individual who - on an approved leave of absence - is enrolled on a full-time basis in credit courses.

Employee Name _____ Soc. Sec. No. _____
(optional)
Race _____ Sex _____ Tenure Status _____
Department _____ Budget Acct. No. _____
Current degree status _____
(degree & area) Additional hours beyond
last degree (No.)

Please provide answers to the following questions:

- (1) Is the employee a full-time faculty member or administrator who has been employed at the nominating institution two or more years:

Yes ☐ No ☐

- (2) Will the proposed study for which support is recommended enhance the employee's value to the institution as defined below (Check appropriate purposes)?

- ☐ Support for person working toward the doctorate or other terminal degree
- ☐ Support for person pursuing a degree below the doctorate in a technical or professional description
- ☐ Support for personnel training or retraining to enhance expertise needed by the institution
- ☐ Other (Explain)

(3) In choosing to recommend the employee from those eligible, has the institution recognized the following priorities?

- (a) requests for minority and female personnel,
- (b) requests for tenured faculty,
- (c) requests for tenured/nontenured personnel of departments in which the institution desires further development.

Yes ☐ No ☐

(4) What is the institution at which the individual will be studying?

(5) What is the name of the program and degree level goal in which the individual will be studying?

(Name of Program) (Degree Level: Bacc., Masters, Specialist, Doctorate, other)

(6) For which terms is the individual seeking grant-in-aid support as a full-time student (check appropriate terms in A or B below, depending on the calendar of the institution in which the individual is studying)?

(A) For Semester institutions

- ☐ Summer semester, 19 _____
- ☐ Fall semester, 19 _____
- ☐ Spring semester, 19 _____
- ☐ Other: Explain _____

(B) For Quarter institutions

- ☐ Summer quarter, 19 _____
- ☐ Fall quarter, 19 _____
- ☐ Winter quarter, 19 _____
- ☐ Spring quarter, 19 _____
- ☐ Other: Explain _____

No grant-in-aid shall be awarded for a period longer than twelve (12) months.

(7) What is the amount and purpose for the requested grant-in-aid support? _____

(A) Tuition-related fees requested (provide total)
for terms checked in #6. _____

Reimbursement of tuition/related fees may not exceed actual maintenance fees or tuition. Tuition-related fees may include maintenance fees, tuition, debt service fees, service charges and incidental fees payable at the time of registration, but shall not include room, board, and supplies.

(B) Monthly living allowance requested (Total) _____

Monthly living allowances may not exceed 50% of the grantee's monthly salary. Academic year salaries are to be divided by nine to derive an equated monthly salary rate. Total living allowances for the maximum twelve-month grant period may not exceed \$11,000.

Base Salary? _____

FY or AY? _____

Monthly Salary? _____

(C) Grant-in-aid support requested (Total) _____

(8) Indicate below the source and amount of any additional support the individual will have for expenses incurred during the period indicated in #6.

Amount _____ Source _____

(9) Provide information requested below concerning any other grant-in-aid the individual may have had.

(A) Has the individual previously held a grant-in-aid? Yes ___ No ___

(B) If "yes," when? _____

(C) If "yes," where was the study? _____

(D) If "yes," describe what was achieved? _____

(E) If "yes," has the individual fulfilled the "return to employment" obligation? _____

(10) Is an exception to SBR policy 5:01:04:00 requested?

Yes ☐ No ☐

If "yes," explain exception requested.

Recommended Approval of Grant-in-aid:

President

Date

Approval Granted:

Chancellor

Date

STATE BOARD OF REGENTS

Faculty or Professional Staff Tuition or Maintenance Fee Reimbursement Program
Recommendation/Contract Form

This program is designed to provide tuition or maintenance fees only for an individual who takes credit courses on a part-time basis - either at his or her own or at another institution - while continuing work responsibilities at the home institution.

Employee Name _____ Soc. Sec. No. _____
(optional)
Race _____ Sex _____ Tenure Status _____
Department _____ Budget Acct. No. _____
Current Degree Status _____
(degree & area) Additional hours beyond
last degree (No.)

Please provide answers to the following questions:

- (1) Are you a full-time faculty member or administrator who has been employed at the nominating institution six (6) months or more?

Yes ☐ No ☐

- (2) Will the proposed study for which your support is requested enhance your value to the institution as defined below (check appropriate purposes)?

☐ Support for working toward the doctorate or other terminal degree

☐ Support for pursuing a degree below the doctorate in a technical or professional description

☐ Support for training or retraining to enhance expertise needed by the institution

☐ Other (Explain) _____

- (3) Intent for use of tuition or maintenance fee reimbursement:

(a) Location of proposed study _____

(b) Term of proposed study _____, 19 _____

(c) Course(s)	Credit Hour(s)	Maintenance Fee or Tuition
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Reimbursement Requested _____

Reimbursement may not exceed actual maintenance fees or tuition for a maximum of six credit hours per semester or quarter. This maximum does not apply to summer study.

- (4) In requesting support for tuition or maintenance fee reimbursement, do you agree with the stipulations listed in a - d (below)?

Yes ☐ No ☐

- a. The recipient shall be required, after completion of the course or courses, to be employed by the institution for not less than one (1) month of full-time employment for each month of the term of participation in the Faculty or Professional Staff Tuition Reimbursement Program.
- b. Satisfactory completion of coursework must be demonstrated to receive reimbursement and to remain eligible for additional assistance. Institutions may provide reimbursement at the time fees are due; however, it is the obligation of the recipient to repay them if coursework is not satisfactorily completed.
- c. Courses should be scheduled in counsel with supervisors to assure maintenance of optimum job performance. Courses should be scheduled at times other than during regularly scheduled work assignments unless make-up time is scheduled.
- d. It is recommended that complete materials supporting the individuals' requests be maintained on campus. It is further recommended that each recipient be required to provide the president with affirmed grade reports for the course(s) taken.

Signed: _____
Applicant Signature

Date _____

Approved: _____
Immediate Supervisor

Date _____

Approved: _____
Dean or Director

Date _____

Approved: _____
Vice President or Senior Admin. of Division

Date _____

Recommended: _____
President*

Date _____

Approved: _____
Chancellor

Date _____

*If any exception to SBR policy 5:01:04:00 is requested, please explain the request (below).

STATE UNIVERSITY AND COMMUNITY COLLEGE SYSTEM
OF TENNESSEE
FACULTY OR PROFESSIONAL STAFF GRANT-IN AID CONTRACT

THIS AGREEMENT, by and between _____ hereinafter
referred to as "Institution" and _____, hereinafter
referred to as "Employee";

WITNESSETH:

In consideration of the mutual promises herein contained, herein the
parties have agreed and do hereby enter into this agreement according to the
provisions set out below:

A. The Employee agrees to:

1. Pursue additional training and/or education at

(Institution)

terminating with satisfactory accomplishment of
the following academic objectives:

beginning _____/19____,

and ending _____/19____.

2. Render full-time employment service (exclusive of summer and
intersession employment) to Institution for a period of three (3)
months for each month of grant-in-aid awarded and paid commencing
at the completion of the above-specified period.

3. To reimburse the Institution the total amount or pro rata portion of the awarded grant plus interest at the rate of eight percent (8%) per year in the event, 1) that employee fails to return to the service of the Institution for the period stated herein, or 2) that Institution terminate Employee's services for cause.
4. To comply with, all terms and conditions of the award of grants-in-aid under SBR Policy No. 5:01:04:00, as amended and in effect on the date of this contract.
5. Execute a promissory note acknowledging receipt of the grant-in-aid and containing repayment terms and conditions consistent with this agreement.
6. Utilize the grant-in-aid only for costs that are directly related to tuition-related fees and monthly living expenses consistent with the academic objectives outlined herein.
7. Prepare and give a written report to Institution on progress achieved during each term of sponsored enrollment.
8. Provide all information requested by Institution or its representative for the purpose of assessing employee's progress toward the designated academic objective.

B. Institution agrees to:

1. Furnish to employee for a period of _____ months the sum of \$ _____ per month as a monthly living allowance plus actual tuition or enrollment fees in the maximum amount of \$ _____ per (semester/quarter) for _____ terms, to enable employee to complete the stated training and/or education.

C. It is mutually agreed:

1. That employee meets the requirements for eligibility for participation in the faculty or professional staff Grant-In-Aid program as outlined in SBR Policy No. 5:01:04:00.
2. Institution may terminate the employment of Employee prior to the commencement of or during the employment service period provided herein. In the event such termination by Institution is without cause, Employee shall be relieved of further liability under this contract. In the event of termination of Employee for cause, the Employee shall be liable to the Institution pursuant to the provisions of this agreement.

3. This agreement will not become binding upon either party until approved by the Chancellor of the State Board of Regents or his designee.
4. All amendments and/or modifications to this agreement shall be by written agreement approved by the State Board of Regents.

In consideration of the mutual promises set forth hereinabove, the parties have executed this agreement as of the dates their signatures are set forth below.

Employee

Date

Institution President

Date

APPROVED:

By: _____
Bert C. Bach
Vice Chancellor for Academic Affairs

Date

By: _____
James R. Vaden
Vice Chancellor for Business & Finance

Date

PC 191 FORM

TO BE COMPLETED BY THE EMPLOYEE

Employee Name _____

Social Security No. _____

Institution _____

I request approval to enroll in a course during the
term at _____ (institution). The course in which I
wish to enroll is _____ (title and number), which carries
_____ hours of credit and meets from _____ to _____ o'clock on
_____ (days of week) from _____ to _____ (dates).

I understand the conditions of effecting my enrollment in this course and
certify that I meet all regulations identified in PC-101

Signature _____ Date _____

TO BE COMPLETED BY THE PERSONNEL OFFICE

This request is approved _____. I certify that _____
is a full-time employee of this institution and that he/she has adequate
annual leave hours accumulated to attend above course during work hours (if
leave is to be used).

Signature _____ Date _____

TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR

This request is approved for _____ who is under my
direct supervision and I certify that all regulations of PC-191 have been
met by applicants.

Name of supervisor _____ Title _____

Signature _____ Date _____

White - Registration, Yellow - Personnel
Pink - Employee, Gold - Business Office

EMPLOYEE SCHOLARSHIP APPLICATION	
Austin Peay State University	
(Complete one application for each course.)	
TO BE COMPLETED BY APPLICANT	
1. Name:	_____
2. Soc. Sec. No.:	_____
3. Position:	_____
Date Employed:	_____
4. Employment Status:	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>
5. Department:	_____
6. Course No. & Title:	_____
7. No. Credit Hrs.: Graduate _____ Undergraduate _____	
8. Quarter:	_____ Year _____
9. Class Schedule:	_____ (beginning & ending times; days of week)
(Applicant Signature) _____ (Date) _____	
Instructions to Applicant:	
Step 1: Apply for and obtain final acceptance for admission to APSU.	
Step 2: Complete and sign form and submit it to immediate supervisor at least two weeks prior to registration for the quarter in which enrollment is desired.	
Step 3: Present the original to the cashier at registration in lieu of fee payment.	
APSU/FA/PA/002 (Rev. 3-85)	

FOR BUSINESS OFFICE USE ONLY	
Scholarship Allocation \$ _____	Budget Account No. _____
(Vice President for Finance & Admin.) (Date) _____	
TO BE COMPLETED BY SUPERVISOR	
1. Applicant's Normal Working Hrs.: _____	
2. Applicant's Normal Lunch Hrs.: _____	
3. If applicable, indicate arrangements for compensation of time away from the job:	
Adjusted lunch hrs. on non-class days. (Specify: _____)	
Early beginning work time. (Specify: _____)	
Late ending work time. (Specify: _____)	
Annual leave. (Specify hrs. per wk.: _____)	
Other. (Specify: _____)	
Approved: _____ (Immediate Supervisor) (Date) _____	
I certify that the applicant meets all SBR and APSU policies.	
(Dean or Director) (Date) _____	
I certify that the applicant meets all SBR and APSU policies.	
(Vice President or Senior Administrator of Division) (Date) _____	
I certify that the applicant meets all SBR and APSU policies.	
Route form to Vice Pres. for Fin. & Admin. for allocation of funds.	

APPLICATION

AUSTIN PEAY STATE UNIVERSITY

Scholarship Program for Faculty and Administrators Audit
(Please see reverse side)

1. Name: _____ Soc. Sec. No. _____
2. Title of your position: _____
3. Department or office: _____ Dept./Office
Budget No.: _____
4. Course to be audited: _____
(Dept.) (No.) (Title) Cr. Hrs.
5. Quarter: _____ Year: _____
6. I understand that this audit scholarship is available to me for courses offered for credit on a space-available basis and that it is possible that space will not be available for me in the class I wish to audit.

(signature of applicant)APPROVED:_____
(Immediate Supervisor) (Date)_____
(Dean or Director) (Date)_____
(Vice President) (Date)_____
(President) (Date)

Instructions:

1. You must first apply for and complete admission to Austin Peay State University and be accepted. You should accomplish this a month in advance of registration.
2. Please complete the above application at least two weeks before the beginning of the quarter in which you wish to audit a course.
3. Please complete five copies;
1 - original to be submitted at registration in payment of maintenance fee
1 - Personnel Office
1 - to individual's personnel file in appropriate Vice President's office
4. Submit the approved original of this application at registration in payment of the maintenance fee.
5. Eagle University classes and non-credit Continuing Education classes are excluded from this scholarship program.

Faculty and Administrators Audit (Approved by Board of Regents at
December 1974 meeting)

Faculty and administrators may continue to develop their skills and knowledge through participation in educational programs that are available on a formal and organized basis. As an incentive, the faculty and administrators may request sponsorship from their department or administrative unit for a scholarship not to exceed the maintenance fees for the coursework taken. The following rules are established as guidelines:

1. This scholarship program is available to all full-time faculty and administrators that have been employed by the institution for at least six months.
2. Faculty and administrators may be permitted to audit courses and the institutions pay the maintenance fee for audit with the approval of the president of the institution.
3. All such audits must be accomplished at the institution where the person is employed. Faculty and administrators requesting a scholarship must meet the requirements for admission and are subject to institutional regulations and academic procedures.
4. Faculty and administrators, in counsel with their immediate superiors, should limit the number of courses audited so as to maintain an optimum level of job performance.
5. Course enrollment will be permitted on a "space available" basis.
6. After the faculty and administrators have made application for admission and have received final acceptance, they must submit the request to their superior two weeks prior to registration.
7. Institutional participation is contingent on availability of funds and institutional benefit in such participation.
8. Exceptions to these guidelines can be made by recommendation of the president as an exception and approval by the State Board of Regents.