

Purdue Tuition Grant Request

Employee Name: _____ Employee #: _____ Hire Date: _____

Job Title: _____ Phone #: _____ Email: _____

Rollins Brand: _____ Department Name: _____ Department #: _____

Academic Program of Study: _____

Planned Start Date: _____

How do you plan to apply your coursework to your career at Rollins?

I have read and understand the Tuition Grant Program policy and the Purdue University Global policy and guidelines. If my participation is approved, I understand that tuition expenses will be paid directly to Purdue up to a maximum of \$5,250 (\$7,500 for graduate programs) per calendar year. I must receive a passing grade for each course and remain in compliance with the Purdue Global Standard Academic Progress policy to remain eligible for the benefit. If I receive a failing grade for a course, I will be personally responsible for the cost to retake the course.

I further understand and agree to the following terms of repayment. If I voluntarily terminate my employment within 18 months of the course completion and/or participation date, I will reimburse the Company on a pro-rated scale of the benefits that I received. I will submit payment for these benefits no later than 30 days after my termination effective day, and hereby authorize the Company to deduct said sum from any monies owed by the Company to me. The pro-rated scale is as follows:

Continued Service after Receiving Tuition Reimbursement	Employee Reimbursement %
0 – 12 months	100%
13 – 18 months	25%

Employee Signature: _____ Date: _____

First Level Manager: _____ Date: _____ Approved Not Approved

Second Level Manager: _____ Date: _____ Approved Not Approved

HR Business Partner: _____ Date: _____ Approved Not Approved

Human Resources: _____ Date: _____ Approved Not Approved

If not approved, indicate reason: _____

PLEASE RETURN TO ROLLINS AT PURDUE AT purduetuition@rollins.com