

Instructions for Completing Continuing Education Forms

Center for Leadership Executive Programs

Before you complete the Center for Leadership Executive Program Form (found below), consider the following:

Benefits eligible employees who work 1,000+ a year may qualify to attend continuing education programs funded by the Office of Human Resources with their supervisors' approval. In order to qualify for continuing education funds, these programs must be approved for Continuing Education Units (CEUs) or Certified Professional Education (CPEs).

Please print a copy of the *appropriate* continuing education form, complete the applicable sections, and send the form to the Office of Human Resources, St. Mary's Hall +1649.

- A. **Application for Continuing Education Funds - General Form** – use this form for all continuing education programs *except* for Executive and Emerging Leader programs.
- B. **Application for Continuing Education Funds – Executive Program** – use this form for Executive programs. Please be aware that the form may be completed for either the full-day or the half-day option.
- C. **Application for Continuing Education Funds – Emerging Leader Program** – use this form for *individual* Emerging Leader sessions.

Please contact the appropriate office/department that is sponsoring the program for cancellation/substitution requirements.

Please contact Alex Polzella at 229-4895 or polzellaa1@udayton.edu with general questions about continuing education at UD.

UNIVERSITY OF DAYTON
OFFICE OF HUMAN RESOURCES

APPLICATION FOR CONTINUING EDUCATION FUNDS
CENTER FOR LEADERSHIP EXECUTIVE PROGRAM

Program	Cost	Program date(s)
---------	------	-----------------

Employee's Name	University ID
-----------------	---------------

Department	+4 Zip
------------	--------

Employee Signature	Campus Phone	Date
--------------------	--------------	------

Supervisor Signature	Date
----------------------	------

CHARGE TO (Full Day):

Date	Index/ Expenditure Account	\$500.00 Amount	Department/Division Authorized Signature & Title
------	----------------------------------	--------------------	---

CREDIT (Full Day):

91592/7390 Account/ Subaccount	\$500.00 Amount
--------------------------------------	--------------------

CHARGE TO (Half Day):

Date	Index/ Expenditure Account	\$290.00 Amount	Department/Division Authorized Signature & Title
------	----------------------------------	--------------------	---

CREDIT (Half Day):

91592/7390 Account/ Subaccount	\$290.00 Amount
--------------------------------------	--------------------