POLICY COVER SHEET

(See Faculty Staff Handbook 1460 for instructions at UI policy website: www.webs.uidaho.edu/uipolicy)

[3/09]

Faculty/Staff Handbook [FSH] □ Addition ☐ Revision* □ Deletion* □ Emergency
Minor Amendment □
Chapter & Title: 3740: Employee Educational Assistance

Minor Amendment □
Chapter & Title: ____________________________________________

All policies must be reviewed, approved and returned by a policy sponsor, with a cover sheet attached to apm@uidaho.edu or fsh@uidaho.edu respectively.

*Note: If revision/deletion request original document from apm@uidaho.edu or fsh@uidaho.edu, all changes must be made using “track changes.”

Originator(s): Linda Campos 6/14/2016
(Please see FSH 1460 C)
Name Date
Telephone & Email: 5-6530 lcampos@uidaho.edu

Policy Sponsor: (If different than originator.)
Name Date
Telephone & Email:

Reviewed by General Counsel  Yes  No  Name & Date: ____________________________________________

I. Policy/Procedure Statement: Briefly explain the purpose/reason of proposed addition, revision, and/or deletion to the Faculty/Staff Handbook or the Administrative Procedures Manual.
Minor edits within the meaning of FSH 1460 B-2. Purpose is to update the policy and to avoid specific reference to the Internal Revenue Code. This does not change the intent of the policy or eligibility.

II. Fiscal Impact: What fiscal impact, if any, will this addition, revision, or deletion have?
Changes bring the language into alignment with controlling law and provide employees the maximum benefit under tax law. Employees and the University will see financial savings from reduced employment taxes on tuition waivers.

III. Related Policies/Procedures: Describe other policies or procedures existing that are related or similar to this proposed change.
A similar change may be recommended for the Spousal Educational Benefit Policy for consistency (3750 A). However, that language is accurate under current tax code.

IV. Effective Date: This policy shall be effective on July 1, or January 1, whichever arrives first after final approval (see FSH 1460 D) unless otherwise specified in the policy.

If not a minor amendment forward to: ____________________________________________

Policy Coordinator
Appr. & Date:  __________________________
[Office Use Only]

FSH
Appr.  __________________
FC  __________________
GFM  __________________
Pres./Prov.  __________________
[Office Use Only]

Track # __________________
Date Rec.:  __________________
Posted: t-sheet  __________________
h/c  __________________
web  __________________
Register:  __________________
(Office Use Only)

APM
F&A Appr.:  __________________
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