FREDERICK COMMUNITY COLLEGE IN-COUNTY TUITION RATE AGREEMENT

	This Agreement is Community	nade and enter College,	red into the hereinafter	day of referred	to	as hereinafter	the	60	'College	e"	and
	which maintains f In consideration of the Employer agree	of the mutual p									-
		 Ollege's Responsibilities The College agrees: A. To provide education and/or training for the Frederick County Employer's employees as mutually agree upon by the College and the Employer. B. Unless otherwise agreed in writing, the College will charge the fees equivalent to the tuition and fee approved by the Board of Trustees and normally borne by residents of Frederick County who a registered in the same or similar courses. 									
	upon B. Unles appro										fees
II	. Employers Responsibilities The Employer agrees:										
	certif	A. That in order for the Employer to qualify for the In County Tuition Rate Agreement, the Employe certifies that they are a Frederick County business and that they offer their Employees a Tuition Reimbursement Program.									•
	B. That control of the control of th	the Employee value the tuition and ally to the college must a coll	will be enrolled in fees charged by ege by the Emp ram. receive payment.	the College purs loyer or the En , or authorization	suant to nployed on for	paragraph I e in accorda the College	B. of this nce with to bill the	Agr the	reement Emplo Employe	will be payer's tui	ition the
III	published deadline in the College's term Schedule, or the Employee will be expunged from their class(es). College Policies and Procedures										
	With the exception of payment of tuition and fees, employees enrolled under this program shall be transported any other student in accordance with College policies and procedures and the general policies of the Migher Education Commission. In the event that the Employer fails to honor its obligations under Agreement, the College reserves the right to bill the student (employee) directly.							he Maryl	land		
	<u>In order</u>	to receive thes	e benefits, the E	mployer must	select o	one of the fol	llowing ty	<u>vo o</u>	ptions:		
	Stude the O numb of the The e	Employee to Pay FCC: A letter on Employer's letterhead "letter of intent" will be submitted to the Student Account's Office each semester signed by the Director of Human Resources or the President of the Organization stating that the student is an active employee. The letter must contain approved course number(s) and course title(s). Any courses not covered by the letter of intent will be the sole responsibility of the employee and billed at rates according to the student residency policy. The employee must pay all tuition and fees at the time of registration or before the deadline date that it established in the College's schedule.							nt of ourse oility		
	the E	mployer's lette	CC: At the timerhead "letter of or the Presider	intent" to the	Student	t Account's	Office si	gned	by the	Directo	or of

organization. Each letter must contain course number(s), course title(s). Any courses not covered by the letter of intent will be the sole responsibility of the employee and billed at rates according to the student residency policy. The employer agrees that payment is **not** contingent on the employee receiving a

passing grade, receiving financial aid, or completing the course.

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Please select all categories that will be	paid by the employer on the employ	vee's behalf.
☐ Tuition & All Course Fees	Books	
If not covering all Course Fees, please	select the fees covered from the foll	owing list:
Tuition Consolid	dated Fees Student Activ	ity Fee
Other Course Related Fees, Ple	ase Specify (i.e. MCSE, Music, etc.)
This agreement will become effective upon approvaterminated. Either Party may terminate this agreement effective after the completion of the current courses.		
Any changes or additions shall not become binding up parties. This Agreement, when fully executed, shall su in writing, with respect to the subject matter in this Agr	persede any and all prior and existing	ng agreements, either oral or
Email completed agreement to <u>studentaccounts@frederapproved</u> , a letter of intent can be hand delivered, faxed office at <u>studentaccounts@frederick.edu</u> .		•
Employer's Name		Telephone
Employer's Business Address	City, State, and Zip	County
Employer's Federal Tax Identification Number:		
Employer's Authorized Representative (Print)	Title	Signature
Employer's Contact information (Email Address	_
This agreement has been approved by Frederick Community College		
Jane E Beatty		Date
Director of Student Finance/Bursar Frederick Community College		
External Org ID:		