

## City of Sandpoint

### Employee Training, Licensing, and Certification Approval and Reimbursement Policy

#### Policy Purpose

The purpose of this policy is to establish the required pre-approval of City-paid training and establishes reimbursement obligations of employees who receive City-paid training, licensing, or certification required for their job duties that results in the employee receiving a certification or license, including renewals of certifications or licenses.

#### Policy Statement

The City of Sandpoint may, at its discretion, cover the costs associated with job-required training, licensing, or certification (hereafter referred to as "training"). All training **must** be pre-approved through submittal of the *Employee Training Pre-Approval Form* attached to this Policy for reference and signed as indicated on the form unless the department has other approval processes in place for training that would not be receiving a job certification or professional or job-related license. Please note that the *Employee Training Pre-Approval Form* is in addition to any required Travel approval and forms.

Training that results in the employee receiving a job certification or professional or job related license, including renewal of certifications or licenses of \$2,500 or more paid for by the City, will be subject to the reimbursement schedule below, in the event the employee voluntarily separates from employment within a specified period after completion of the training or fails to obtain the required certification or license:

#### Reimbursement Schedule Upon Voluntary Separation:

- **Year 1:** 100% of the amount paid by the City
- **Year 2:** 50% of the amount paid by the City
- **After Year 2:** No reimbursement required

The year of service is calculated based on the completion date of the training or certification and the employee's separation date.

#### Exception to above for Extenuating Circumstances:

In the event of a voluntary separation due to extenuating personal circumstances, the Mayor may, at their discretion, waive or reduce reimbursement requirements.

#### Failure to Obtain Required Certification

If the employee does not obtain the required license or certificate after completing the training, regardless of continued employment status, whether voluntary or involuntary due to job requirements, the employee must reimburse the City for 100% of the training costs paid by the City.

#### Reimbursement Method

Reimbursement amounts owed will be deducted from the employee's final paycheck. This includes any unused Paid Time Off (PTO) payout. If the final paycheck and PTO payout do not fully cover the owed amount, the remaining balance is the personal responsibility of the employee and must be paid to the City within 30 days of separation or notification of reimbursement due.

**Acknowledgment**

Employees will be required to sign a pre-approval training form that will serve as acknowledgment to this Policy and its terms prior to enrollment in any training paid for by the City.

**City of Sandpoint****Employee Training Pre-Approval Form****Employee Information**

- Name: \_\_\_\_\_
- Department: \_\_\_\_\_
- Position Title: \_\_\_\_\_
- Supervisor: \_\_\_\_\_

**Training Details**

- Training/Course Title: \_\_\_\_\_
  - Please attach any training information materials to this form
- Provider/Institution: \_\_\_\_\_
- Location (if applicable): \_\_\_\_\_
- Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_
- Is this training job-required per job description? ☐ Yes ☐ No
- If training is not required but a certificate or license will be obtained or renewed, please provide the benefit to the City for this certification or license:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Is certification/licensure obtained or renewed upon completion? ☐ Yes ☐ No
- If yes, name of certification/license: \_\_\_\_\_
- What is the benefit of this training if no license or certificate is being obtained or renewed:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Estimated Costs**

Item	Cost
Registration/Tuition	\$ _____
Travel (if applicable)	\$ _____
Lodging	\$ _____
Meals/Per Diem	\$ _____
Study Materials/Books	\$ _____
Other (specify): _____	\$ _____
Total Estimated Cost:	\$ _____

\*\*\*\*Please note that if there is travel required, the City Travel Policy and form is in addition to this form\*\*\*\*

**1. Employee Acknowledgment**

I understand that if I do not obtain the required license or certification upon completion of this training, or if I voluntarily leave City employment within three years of completion, I may be required to reimburse the City of Sandpoint according to the **Employee Training, Licensing, and Certification Approval and Reimbursement Policy**. I authorize any amount due to be deducted from my final paycheck, including any PTO payout. If the amount due exceeds my final pay, I understand that I am responsible for the remaining balance as outlined in the Policy.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**2. Supervisor Approval**

I confirm that this training is job-related and recommend approval for the City to cover the associated costs.

Supervisor Name/Title: \_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**3. Department Head Approval**

☐ Approved      ☐ Denied

Comments (if any): \_\_\_\_\_

Department Head Name/Title: \_\_\_\_\_

**Department Head Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**4. Human Resources Director (or Designee) Final Approval for Training Certifications that would be reimbursable under this Policy**

☐ Approved      ☐ Denied

Comments (if any): \_\_\_\_\_

**Human Resources Director/Designee:**

Name and Title: \_\_\_\_\_

**Signature:** \_\_\_\_\_      **Date:** \_\_\_\_\_