



GOODHUE COUNTY

APPLICATION FOR TUITION REIMBURSEMENT

(completed by employee)

This application must be filed with your Department Head prior to the start of the class.

Name | Alex Dicke

Department | Public Works

Job Title | Design Manager

Course Title | Marketing Strategy

School | Saint Mary's University

Course begins | 7/1/24


ends | 8/25/24

Tuition Cost \$ | \$2,280.00

Explain nature or content of course:

THIS COURSE RELATES TO MY POSITION IN VARIOUS WAYS. BEING A FORWARD FACING MEMBER OF THE COUNTY IN RIGHT OF WAY NEGOTIATIONS AND DESIGN EXPLANATIONS, IT WILL HELP ME BETTER UNDERSTAND HOW TO COMMUNICATE THE COUNTY'S VISION AS A WHOLE AND MORE LOCALIZED WHEN IT COMES TO PUBLIC WORKS PROJECTS. HELPING THE TAXPAYER SEE THE VALUE THEY ARE GETTING FROM THEIR DOLLARS WILL HELP SHED A POSITIVE LIGHT ON THE ORGANIZATION AS A WHOLE.

This application is submitted for approval of tuition reimbursement for the above in accordance with the provisions and conditions of the Tuition Reimbursement Policy. My enrollment in this course is voluntary and I understand that my time spent taking the course will not be considered as time worked for Goodhue County. I understand the required vesting period as stated in the Tuition Reimbursement Policy and elect to reimburse the County if the vesting period requirement is not met.

Employee Signature: 

DEPARTMENT HEAD/SUPERVISOR APPROVAL

I believe this course

Will

Will not

benefit this employee in his/her present capacity.

Department Head Signature: 

Date | July 16, 2024

NOTICE OF COMPLETION AND APPLICATION FOR REFUND

The employee named on this application has satisfactorily (received a "C" grade or higher) completed the course described in this application. The completed records of completion and the receipt of payment are attached.

Please refund employee \$ _____ in accordance with the provisions of the Tuition Reimbursement Program.

Department Head Signature: _____

Date | _____