



Service Fitters Industry Promotional Fund
Tuition Reimbursement Program

RULES AND REGULATIONS

I. Eligibility

- A. The student must be a full time salaried employee of a contributing contractor or a member of Metal Trades Branch Local 638 and employed by a contributing contractor to the Service Fitters Industry Promotional Fund of New York.
- B. The contractor shall have made contributions equal to at least twice the requested reimbursement amount.
- C. Company principals are not eligible.

II. Course of Study

- A. The course of study shall be limited to that which is clearly related to the Heating, Ventilation, Air Conditioning or Refrigeration field.
- B. Courses may be taken at any institution, trade school or through any special courses.

III. Reimbursement

- A. The amount will be reimbursed for any given course, including travel, books and supplies, up to \$1,000 per person per year. The total amount to be reimbursed to a contractor in a year is limited to 50% of the contributions paid to the Promotional Fund by the contractor in the prior calendar year. *MSCA Conference reimbursements will not count towards this total.*
- B. The contractor must complete the reimbursement application form and provide proof that the course was paid for and satisfactorily completed.
- C. The Tuition Reimbursement Committee will decide if reimbursement will be made based on the information provided.
- D. The decisions of the Tuition Reimbursement Committee are final.



Service Fitters Industry Promotional Fund of New York
Application for Tuition Reimbursement

Note: The Employer Must Submit This Application To:

The Service Fitters Industry Promotional Fund
535 Eighth Avenue, 17th Floor
New York, NY 10018

Or scan and email to: Mischa@nymca.org

Name of Applicant _____

Name and Address of Employer _____

Is the applicant a member of Metal Trades Branch Local 638? __ Yes __ No

If yes, what is the applicant's book number _____

If no, what is the applicant's position in the company? _____

Name and address of school, seminar or program the applicant attended

Course(s) Taken

Date(s)

Grade

Total cost of tuition _____

I approve this application and understand that reimbursement, if approved, will be made in accordance with the rules and regulations.

Signature of Employer