

Introduction

The **Veolia Education Assistance Policy & Procedure** is designed to help employees further their knowledge, skills and job effectiveness through higher education in fields of interest to the company.

Only courses taken at nationally recognized accredited colleges, universities and technical schools will be approved for reimbursement. Nationally recognized accreditations are those from the U.S. Department of Education and/or those acknowledged by the American Council on Education.

Reimbursement Provisions:

To participate:

- Employees must complete 90 calendar days of continuous active service
- Must be a regular, full-time or regular, part-time (30 hours or more) employee
- Only courses taken at a nationally recognized accredited college, university or technical school will be approved for reimbursement.
- > The employee must meet the performance expectations of his or her current position.
- All participating employees must have the educational investment as part of their individual development plan (IDP) in Veolution.
- Must apply for and be pre-approved (by HR Business Partner and Manager) before enrolling in courses or any other type of formal education such as professional certifications, etc. It is advisable to apply several months prior to coursework begins.

Successful completion of courses is required for tuition assistance to be granted.

- Successful completion of a grade of "A" or "B" or equivalent will be reimbursed at 100%.
- Successful completion of a grade of "C" or equivalent is reimbursed at 85%.
- Successful completion of a "Pass" in a Pass/Fail course will be reimbursed at 100%.
- Unsuccessful completion of below "C" or "Fail" in a Pass/Fail course will not be reimbursed at all.

Eligible expenses include cost of tuition, required textbooks, lab fees, and registration fees. Ineligible expenses include student activities, meals, transportation, parking, finance charges, calculators, computers.

It is expected that time needed for education course(s) will be limited to the employee's personal time off, vacation, or unpaid leave of absence. Occasional time allowances can be made between the Manager and employee to participate in required activities/course(s) held during business hours such as examinations, registration, etc.

Employees not eligible:

- A temporary employee
- An intermittent employee
- A summer intern or summer hire
- An employee unable to work due to illness or injury, or is on a personal leave, disability leave, labor dispute, military leave of absence or family medical leave of absence (FMLA) (if the absence or leave began prior to the application for Tuition Reimbursement).

Proceed to Tuition Reimbursement Application (Page 2)



Education Assistance Application - Employee Instructions

- 1. Pre-Approval: Complete sections 1, 2, 2-A and 3 and send to your <u>Human Resource Business Partner</u> to sign section 4-A (Pre-Approval). After pre-approval, register for course(s).
- 2. Final Reimbursement: Upon each course completion and receipt of grade, complete section 2-B and send to your <u>Human Resource Business</u>

 Partner and <u>Manager</u> to sign in section 4-B. <u>VP of Operations</u> and <u>VP of Human Resources</u> signatures must also be obtained before submitting to SSC for payment. Assistance requests must be submitted within 60 days of completion of each course.

Date:

Email Address:

Name:

Job Title:

Work Location:				Hire Date:				
TOTA LOCATION.				Time Date.				
2. Course Inf	formation							
Educational Institute & address:		Major (field of Study):		Accredited?				
		Total credits needed?						
Are you pursuing a degree or certificate?		What type of Degree / Does this cours Certificate? to your current				•		
		certificate.		What position?				
Course Title #1:		Course Title #2:			Course Title #3:			
Date of course:		Date of course:			Date of course:			
2-A Estimate	ed Costs							
Tuition		Required Book Costs		sts	Required Registration / Lab Fees			
Course #1		\$			\$			
Course #2		•			'			
Course #3	was and Daniel							
	rsement Request			of tuition and f	:			
Remember to at	ber to attach documentation of grade transcripts and itemized statem Tuition Required Book Costs			Required Registration / Lab I		Δς.	Total	
Grade #1	%:	Nequired BOOK COSES		,				
Grade #1		\$		\$		\$		
Grade #3%:		\$		\$				
("A"- "B"- Pass = 100%, "C" = 85%)								
Are you receiving any type of government financial aid or other subsidies (e.g., grants, scholarships)?								
Yes			No					

3. Employee Signature

I acknowledge and agree that I am attending the above-entitled course(s) voluntarily, on my own initiative and outside normal Veolia business hours.

I agree that any tuition assistance under the Veolia Education Assistance Policy will be in accordance with the terms, conditions and limitations set forth.

(Continued on Page 3)



Employee Signature (continued from Page 2)

I understand and agree that, if I voluntarily resign or am discharged from employment for cause prior to completing a course (s), I will immediately forfeit my eligibility for possible reimbursement. I also understand and agree that, if I am placed on a Performance Improvement Plan following my submission of this application but before the time that I receive any reimbursement, I will immediately forfeit my eligibility for possible reimbursement.

I further understand and agree that, should I voluntarily leave Veolia within 12 months (undergraduate & certificate) or 24 months (graduate) from the completion of the course(s), I will be obligated to refund to the Company 100% of the reimbursement I have received for such course(s) under the Veolia Education Assistance Program. I hereby agree that, if Veolia determines that a refund is due from me, either at the end of my employment or otherwise, Veolia may deduct such amount from my paychecks as partial or full payment.

I acknowledge and agree that nothing in the Veolia Education Assistance Program or in this application shall create a contract of employment between myself and Veolia. My employment with Veolia is on an at-will basis and may be ended by me or the Company with or without notice or lawful reason, at any time.

I understand and agree that I will not deduct on my income tax return any portion of non-taxable expense(s) reimbursed by Veolia.

Signature:	Print Name:	Data	
		Date:	
4. Reimbursement Approvals			
4-A Pre-Approval			
HR Business Partner Signature:		Date:	
Manager Name & Signature:		Date:	
4-B Final Reimbursement Approval		L	
HR Business Partner Signature:		Date:	
Manager Name & Signature:		Date:	
VP of Operations Name & Signature:		Date:	
VP of Human Resources Name & Signature:		Date:	