

## Tuition Reimbursement Request Form

A *Tuition Reimbursement Request* form **MUST BE** completed and submitted to Total Rewards for course approval prior to registering for a course. For information on the *Tuition Reimbursement Policy*, visit the Policy Center on nova or contact [hrbenefits@inovalon.com](mailto:hrbenefits@inovalon.com).

### Steps for Requesting Approval

1. Complete the *Tuition Reimbursement Request Form* completely. Forms requiring additional information will be returned to you and may result in delays. **Request for approval must be submitted no later than 15 business days before course start date.**
2. Obtain your manager's approval as well as that of your department leader.
3. Send the completed and signed *Tuition Reimbursement Request Form* along with course description and the cost of the course to Inovalon's Total Rewards team at [hrbenefits@inovalon.com](mailto:hrbenefits@inovalon.com). If your manager or department leader is remote, approvals may be provided through email. However, the completed form must accompany the email approval. The form must be submitted no less than 15 business days before the course start date. The Total Rewards Team will retain a copy of the form until the end of the quarter/semester. Please also retain a copy for your files.

### Steps for Reimbursement

Within 30 days after the completion of the course, submit a copy of your grades and itemized receipt/statement to [hrbenefits@inovalon.com](mailto:hrbenefits@inovalon.com). Requests will not be processed until all required documentation is received. Reimbursement will be made within one to two pay periods after all required documentation is received.

#### Important Notes to Associates

- The maximum reimbursement for tuition expenses is \$5,250 per calendar year. Tuition reimbursements are applied to the calendar year in which they are paid. For example, if your class ends in December and you receive reimbursement in January, your reimbursement amount counts toward the \$5,250 maximum for the January calendar year.
- If you did not receive a satisfactory grade (A, B or Pass) for any course, the tuition will not be reimbursed.
- Courses audited by the associate are not eligible for reimbursement.

#### Important Notes to Managers and Department Leaders

Approval of tuition reimbursement requests must be in accordance with the requirements found in the *Tuition Reimbursement Policy* as follows:

- The course must have relevance to the associate's scope of work;
- The associate must have worked for Inovalon or one of its subsidiaries (hereafter, the "Company") for a minimum of 90 days;
- The associate must be a regular, full or part-time associate of the Company scheduled to work 30 or more hours per week and not an intern or employed on a temporary basis;
- The associate must have received a meets or exceeds performance level (2.5 or higher rating) on their most recent performance review (if applicable); and
- The associate cannot be on a Performance Improvement Plan or have received a disciplinary action within the prior 18 months including, but not limited to, written warnings and disciplinary suspensions.



## Tuition Reimbursement Request Form

Submit this form *before* taking the course.

<b>Employee Name</b>			<b>Supervisor Name</b>		
<b>Work Email Address</b>			<b>Business Unit/Department</b>		
<b>Job Title</b>			<b>Date of Hire</b>		
<b>Semester (check appropriate boxes and fill in blanks)</b> <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer			<b>Course Dates</b> Start: _____ End: _____		
<b>School/University</b>				Classroom <input type="checkbox"/> Yes <input type="checkbox"/> No Online <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Indicate Degree Type/Certificate</b>				<b>Expected Graduation/Completion</b>	
Course #	Course Title	Units/ Credit Hours	Days (e.g., MWF)	Time (e.g. 2-4pm)	Cost
<input type="checkbox"/> I am <input type="checkbox"/> I am not receiving other financial aid. (If yes, provide documentation of amount and how it will be applied)					
Is this course part of an approved Academic Plan?    ___Yes    ___No  Please explain how the course(s) will maintain or improve the skills required for your current position. _____ _____					

I understand that I am solely responsible for payment of taxes as a result of any reimbursement for education that may be found to be taxable. I understand also that Inovalon Inc.'s tax withholding policy and any decision to withhold or not withhold taxes from educational reimbursements to me do not constitute tax advice. I agree to hold Inovalon Inc. harmless from any claim associated with Inovalon Inc. withholding of payroll taxes. I will submit grades and receipts within 30 days of the end of the term to [hrbenefits@inovalon.com](mailto:hrbenefits@inovalon.com).

I understand that as part of my participation in the Tuition Reimbursement Program, I am required to continue my employment with the Company for the duration of the course and for a minimum of one year after completion of the course/class for which I receive reimbursement. If my employment is terminated voluntarily before such time, then I will be responsible for repaying the tuition funds I have received within 30 days of my termination date.

I understand that I am at all times an at-will employee of the Company and the receipt of tuition reimbursement funds does not alter my at-will employment status. I also understand that in the event any conflicts arise with the terms of my employment agreement, that the terms of my employment agreement are controlling.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Manager Approval \_\_\_\_\_ Date \_\_\_\_\_

Department Leader Approval \_\_\_\_\_ Date \_\_\_\_\_