

GROCERY HEROES

**SCHOLARSHIPS &
TUITION
REIMBURSEMENT**

**TUITION
& CERP
GUIDELINES**



SuperMarket SuperHeroes can pay for school and training for themselves and their family!

GROCERY HEROES

TUITION REIMBURSEMENT & CERP GUIDELINES



The primary goal of the OGF Education and Tuition Reimbursement Program is to provide financial support to individuals who wish to enhance skills, increase job knowledge and further careers in the food industry. OGF will also reimburse companies who would like to provide continuing education opportunities and job enhancement for their employees.

REQUESTS FOR REIMBURSEMENT

Please carefully review the below guidelines prior to submitting your application for reimbursement to the Ohio Grocers Foundation.

A. To be eligible for reimbursement, applicants must meet the following guidelines:

1. Employed by an Ohio Grocers Association member in good standing;
2. Must work a minimum of 20 hours per week;
3. Must have worked for an OGA member employer for a minimum of one year;
4. Companies must be members in good standing of the Ohio Grocers Association;
5. Have submitted an application within 60 days of course completion.

B. (For Individuals) To be eligible for reimbursement, applicants must supply the following documentation:

1. Completed application (each course must have a separate application);
2. Verification of work hours and length of employment from employer; Proof of course payment; Proof of course completion and dates thereof;
3. Proof that a grade of “C” or better was given upon completion of the course. (Or if grades were not awarded, a certificate of completion or participation is required);
4. Description of how the course is relevant to the supermarket industry and your job responsibilities;
5. Store manager/owner verification;
6. Store manager/owner to specify and/or concur that the course selection will enhance existing job responsibilities and/or skills or provide enhancement to allow future growth within the company, (for example, cross training or part of career path objectives).

C. (For Companies) To be eligible for reimbursement, applicants must supply the following documentation:

1. Completed application (each course must have a separate application);
2. Proof of course completion and dates thereof;
3. Proof that a grade of “C” or better was given upon completion of the course. (Or if grades were not awarded, a certificate of completion or participation is required);
4. Description of how the course is relevant to the supermarket industry and the job responsibilities of the employee;
5. Store manager/owner verification;
6. Store manager/owner to specify and/or concur that the course selection will enhance existing job responsibilities and/or skills or provide enhancement to allow future growth within the company, (for example, cross training or part of career path objectives).

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REQUESTS FOR REIMBURSEMENT

(continued)

C. To be eligible for reimbursement, the course must:

1. Be provided by an accredited college or university, trade school, career center, approved online college OR be a trade course, such as cake decorating or floral arranging;
2. Enhance existing job responsibilities/skills; or
3. Provide proper education that will allow the individual to seek promotion opportunities within the company.

REIMBURSEMENT GUIDELINES (Individual and Company)

Reimbursement will only be available for that portion of the costs *not covered* by other sources (for example, employer, grants, scholarships, sponsorships, etc.) Eligibility for reimbursement funds will only be for the portion *not covered* by your employer and/or other courses.

Tuition reimbursement fund requests are reviewed on an as-received basis and approved semi-annually. During each half of the year, a **limited amount of funding will be available**. If the Ohio Grocers Foundation exhausts its available funds for a particular time period, applicants are encouraged to apply again, and long as the course/session date of completion meets the guidelines stated above.

Semi-Annual Deadline Dates

April 15th

October 15th

DISBURSEMENT GUIDELINES

- A. The maximum reimbursement per person in one calendar year is \$1,000.
- B. The maximum amount of funding per course is:
 - a. For full-time (at least 12 credit hours) students $\frac{1}{2}$ of cost of course up to \$500
 - b. For part-time students $\frac{1}{2}$ of cost of course up to \$350
- C. Multiple applications may be submitted up to the maximum reimbursement amount.



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TUITION REIMBURSEMENT/CERP GUIDELINES

INDIVIDUAL/ATTENDEE APPLICATION



NAME _____ EMAIL _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME/CELL PHONE _____ BUSINESS PHONE NO. _____

COMPANY NAME _____ JOB TITLE _____

OF YRS WITH COMPANY _____ # OF HOURS WORKED PER WEEK _____

COMPANY ADDRESS _____

CITY _____ STATE _____ ZIP _____

COURSE TITLE _____

(Please submit a separate application for each course)

THE COURSE WAS OFFERED BY _____

(name Of College, University, Trade School, Career Center, etc.)

(This program does NOT cover any OGA/OGF, FMI, NGA or Wholesaler Conferences and Seminars)

COURSE STARTING DATE _____ COURSE ENDING DATE _____

____ FULL-TIME STUDENT

____ PART-TIME STUDENT

DESCRIBE HOW THE COURSE IS RELEVANT TO THE SUPERMARKET INDUSTRY AND YOUR JOB RESPONSIBILITIES:

COURSE FEE \$ _____ DID YOUR EMPLOYER/OTHER SOURCE CONTRIBUTE TO THE FEE? ___ YES ___ NO

IF YES, LIST THE AMOUNT OF MONEY CONTRIBUTED AND THE SOURCE:

\$ _____ SOURCE OF CONTRIBUTION: _____

IS THIS COURSE PART OF A DEGREEED PROGRAM? ___ YES ___ NO

IF YES, WHAT DEGREE? _____

I have reviewed the criteria and understand that my eligibility for reimbursement funds is contingent upon compliance with program guidelines and the availability of funds. I also understand that funding is on a first-come, first-serve basis and that submitting a completed application does not guarantee that I will receive monetary support from the Ohio Grocers Foundation or Ohio Grocers Association. I affirm that the information on this application is true and accurate to the best of my knowledge and belief.

Applicant Signature

Date

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For more information on scholarships, tuition reimbursement or the application process, contact Molly Talley at molly@ohiogrocers.org or direct: 614-512-6424.



GROCERY HEROES

TUITION REIMBURSEMENT/CERP GUIDELINES

INDIVIDUAL/ATTENDEE APPLICATION



Please have your Store Manager or Owner complete the following:

(No applications will be accepted without the below verification and comments.)

I affirm that the above information is true and accurate to the best of my knowledge and belief, and I affirm that our company supports this employee's effort to pursue educational opportunities as related to job responsibilities and opportunities in the workplace.

As the Store Manager or Owner, I believe that the course will enhance the applicant's current job responsibilities/skills and provide enhancement to allow future growth within the company in the following ways:

Store Manager/Owner Name

Title

Store Manager/Owner Signature

Date

All employers must be a current member in good standing with the Ohio Grocers Association.

Tuition Reimbursement does NOT cover any OGA/OGF Events.

Please submit a separate application for each course. Along with this application, please enclose proof of course payment, course completion date and course grade (or certification of completion).

The most efficient submission process would be email, however, a postal mail option is available.

Please submit application and supporting materials via email to molly@ohiogrocers.org or online at www.ohiogrocers.org/foundation/scholarships-master/

For postal mail:

**Ohio Grocers Association GROCERY HEROES
Scholarship and Tuition Assistance Program
1335 Dublin Rd • Ste 207B • Columbus, OH 43215**



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GROCERY HEROES

TUITION REIMBURSEMENT/CERP GUIDELINES

INDIVIDUAL/ATTENDEE APPLICATION



COMPANY NAME (AND/OR STORE #) _____

ADDRESS _____

CITY STATE ZIP

MANAGER/SUPERVISOR NAME _____

TITLE _____ PHONE/CONTACT NUMBER _____

EMAIL _____

EMPLOYEE NAME (COURSE APPLICANT) _____

EMPLOYEE ADDRESS _____

CITY STATE ZIP

COURSE TITLE _____

(Please submit a separate application for each course)

THE COURSE WAS OFFERED BY _____

(name Of College, University, Trade School, Career Center, etc.)

(This program does NOT cover any OGA/OGF, FMI, NGA or Wholesaler Conferences and Seminars)

COURSE STARTING DATE _____

COURSE ENDING DATE _____

____ FULL-TIME STUDENT

____ PART-TIME STUDENT

DESCRIBE HOW THE COURSE IS RELEVANT TO THE SUPERMARKET INDUSTRY AND YOUR JOB RESPONSIBILITIES:

COURSE FEE \$ _____ DID YOUR EMPLOYER/OTHER SOURCE CONTRIBUTE TO THE FEE? ____ YES ____ NO

IF YES, LIST THE AMOUNT OF MONEY CONTRIBUTED AND THE SOURCE:

\$ _____ SOURCE OF CONTRIBUTION: _____

IS THIS COURSE PART OF A DEGREED PROGRAM? ____ YES ____ NO

IF YES, WHAT DEGREE? _____

(continued)



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