

**Big Sandy Area Community Action Program  
Head Start**

**230 Court Street • Paintsville, KY 41240  
606-789-1600 phone • 606-789-5192 fax**

**CDA Tuition Reimbursement Agreement**

Realizing the importance of education, BSACAP supports and encourages all staff in furthering their professional credentials. To that end, tuition assistance is available to help staff reach their educational goals, thereby enhancing performance and service to clients.

While it is the desire of the agency to retain productive and educated employees, BSACAP understands that oftentimes other career opportunities are presented. However, in accordance with Section 648A of the *Improving Head Start for School Readiness Act of 2007*, teaching staff who accept financial assistance from the BSACAP Head Start program toward college tuition must agree to the following stipulations:

- ◆ An employee working as a lead teacher or teacher assistant that receives tuition assistance from the Head Start program toward CDA courses and voluntarily or involuntarily vacates their position before one (1) year has lapsed from the date of receiving the assistance will reimburse BSACAP for the total amount of tuition assistance paid by this agency following the date of this contract.
- ◆ An employee working as a lead teacher or teacher assistant that receives tuition assistance from the Head Start program toward CDA courses and voluntarily or involuntarily vacates their position before two (2) years have lapsed will reimburse BSACAP for said tuition assistance equal to two-thirds (2/3) of the total amount paid by this agency following the date of this contract.
- ◆ An employee working as a lead teacher or teacher assistant that receives tuition assistance from the Head Start program toward CDA courses and voluntarily or involuntarily vacates their position before three (3) years have lapsed will reimburse BSACAP for said tuition assistance equal to one-third (1/3) of the total amount paid by this agency following the date of this contract.

By signing below, I verify that I have read and understand the terms set forth in this agreement. I understand that if I receive college tuition assistance from BSACAP while pursuing a Child Development Associates (CDA) Degree and choose to end my employment with Head Start prior to working a total of three (3) years, I will be required to reimburse the agency according to the stated terms above.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Delegate/Program Name

\_\_\_\_\_  
Classroom

\_\_\_\_\_  
Grantee Head Start Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Grantee Executive Director

\_\_\_\_\_  
Date