

WCHRMA Education Benefit Award Program

Established January 1, 2007

The purpose of this Program is to facilitate development of the human resource profession in the local area, and to provide financial support to WCHRMA members pursuing such development.

Two types of Education Benefit Awards are available for qualified members. The two types are:

1. \$100 toward the cost of a PHR, SPHR, or GPHR test fee incurred on or after January 1, 2006
2. \$100, or the actual cost if less than \$100, to be applied toward the registration cost of an educational activity occurring on or after January 1, 2007, for which continuing education credit(s) for PHR, SPHR, or GPHR certification are approved by HRCI

To qualify for an Education Benefit Award, the member must meet all of the following requirements.

1. Maintain WCHRMA membership for at least two complete consecutive years (must have paid one complete annual membership fee plus one renewal membership fee) prior to the date that the expense is incurred.
2. Certify that in the absence of the Education Benefit Award, the expense would be an out-of-pocket personal expense for the member.
3. Complete an Education Benefit Award Request Form and submit such form to the WCHRMA Membership Chair Person, along with documentation of the education expense.
4. Received no Education Benefit Award from WCHRMA within the past 24 months. (Members may not receive an Education Benefit Award more often than once every 24 months.)

An Education Benefit Award normally will be made payable directly to the testing agency or the conference sponsor organization. However, payment may be made to the member if the member provides evidence of personal payment of the expense. The Award must be repaid to WCHRMA if the member does not take the test or attend the conference for which the Award was paid.

Each request for an Education Benefit Award will be reviewed by the WCHRMA Board at a time convenient to the Board. Award approval will be by majority vote of the Board at its discretion and according to any criteria the Board may deem appropriate, including but not limited to availability of funds budgeted for the Program, and the participation level of the member in WCHRMA. The award of an Education Benefit is not guaranteed to any member under any circumstance.

This Program may be discontinued at any time upon a majority vote of the Board.

WCHRMA Education Benefit Award Request Form

I hereby request an Education Benefit to pay for the following expense:

\$ 100 towards the PHR, SPHR, or GPHR test scheduled on: _____
\$ _____ (Max i\$100) toward the registration cost of this educational activity:
Educ'l Activity: _____ HRCI Credits: _____ Date: _____

I certify that in the absence of this Education Benefit Award, the expense would be my personal out-of-pocket expense. I further certify that I will reimburse WCHRMA if for any reason I do not complete the test or attend the educational activity for which an Award was paid.

Please make check payable to: _____

Member Signature

Date

Print Name: _____

Mailing Address _____

Phone Number: _____

Email Address: _____

**Submit this Form along with required documentation to the Membership Chair Person at:
WCHRMA, P.O. Box 2042, Georgetown, TX, 78627 or email to wchrma@williamsoncountyhr.org.**