



Ensure the most current form is submitted. Refer to EMACS Forms/Procedures website.

Safety Management Education Incentive (Payroll Adjustment)

Job Share / Part-Time Employee Full-Time Employee

Must print in Black or Blue ink ONLY

Employee ID	Rcd No.	Last Name, First Name	Pay Group
Department		Approved Payment Amount	Effective Pay Period

This payment is requested pursuant to the Education Incentive Article of the Safety Management Unit Memorandum of Understanding (MOU) between SEBA and the County of San Bernardino.

Effective August 6, 2016, employees who possess, or subsequently obtain, a Bachelor's Degree or Master's Degree during the term of this MOU shall be eligible to receive a one-time education incentive in the following amounts:

- \$1,500 for a Bachelor's Degree
- \$3,000 for a Master's Degree

To receive the incentive, eligible employees shall be required to submit a written request for the incentive and a verification of their degree to the Appointing Authority. The incentive shall be payable as soon as practicable following the Appointing Authorities verification of such written request.

An eligible employee in a regular position who is part-time or job-sharing shall be eligible for a prorated lump-sum payment based on regularly scheduled hours.

An employee who has separated from County employment or the Unit for any reason prior to submitting a written request for the incentive, or who fails to submit a written request for the incentive prior to the expiration of the MOU, shall not be eligible to receive the incentive.

****Employee may not receive more than a maximum of \$3,000 in Education Incentive Payments****

This Article shall sunset upon the expiration of the MOU.

Complete this prorate section only if the employee is Part-Time or Job Share

Scheduled hours per pay period	Standard hours per pay period	Job Share Prorate	Bonus	Eligible Bonus
<input type="text"/>	<input type="text"/>	= <input type="text"/>	X <input type="text"/>	= <input type="text"/>

I certify that I have verified the employee's eligibility for the Education Incentive per the MOU.

Payroll Specialist Name (Print & Sign)	Telephone	Date
Appointing Authority or Designee (Print & Sign)	Telephone	Date

Office Use Only

PP Begin Date	PP End Date	M11	Verified By/Date	Keyed By/Date	Reviewed By/Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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