



Employee Educational Assistance Completion
FORM EA2 (submit **after course is complete)**

Reimbursement will be processed in accordance with the funding approval and Return Service Agreement documented in the EA1 Educational Assistance Application & Agreement

Employee to Complete with their Leader

Section 1: Employee Information	
Name	
Position	
Financial Dimensions	
Hire Date	
Leader	
Date of Application	

Section 2: Course or Program Information	
Course/Program Title	
Institution/Provider	
Accredited Institution	☐ Yes ☐ No
Start Date	
Completion Date	
Certificate or Transcript Attached	☐ Yes ☐ No
Note: This form must align with the training details and funding approval documented in the EA1 Application and Educational Assistance Agreement.	

Section 3: Completion Confirmation (Required for ALL training)	
Was the training, as listed above, completed with a 'passing' status?	
☐ Yes ☐ No	
If yes, I certify that the information provided is accurate and that I have successfully completed the course(s) listed above. I am submitting the required proof of completion in accordance with the Employee Education Assistance Policy. I understand that providing false or altered documentation may result in disciplinary action.	If no, I understand that I did not complete the approved training with a passing status. I acknowledge that, in accordance with the Employee Education Assistance Policy and the terms outlined in my Educational Assistance Application & Agreement (Form EA1), I am responsible for repaying the cost of the training paid by CEDA. I agree to work with CEDA to arrange repayment as required.
Employee Name	
Employee Signature	
Date	



Employee Educational Assistance Completion
FORM EA2 (submit **after** course is complete)

Section 4: Reimbursement Request (Complete ONLY if employee paid upfront)

Did the employee pay any eligible costs out-of-pocket?

- ☐ Yes — complete this form and submit out-of-pocket expense form to AP
☐ No — skip to Section 5

Expense Type	Amount	Receipt Attached
Tuition	\$	☐ Yes ☐ No
Registration Fees	\$	☐ Yes ☐ No
Required Textbooks	\$	☐ Yes ☐ No
Exam/Certification Fees	\$	☐ Yes ☐ No
Total Reimbursement Requested	\$	

Note: *Attach all required documentation

Leader and Learning & Development to Complete

Section 5: Approval & Filing

Leader

Completion Verified: ☐ Yes ☐ No
Reimbursement Required: ☐ Yes ☐ No
Comments:

Leader Name

Leader Signature

Date

Learning & Development

Reviewed ☐ Yes ☐ No

Grant Application Closed ☐ Yes ☐ No
If no, details:

L&D Name

L&D Signature

Date

**Completed form to be submitted to HR Business partner & Learning & Development
Department for processing**