

## TITLE IV-E TUITION AUTHORIZATION AGREEMENT

I, \_\_\_\_\_, hereby accept a Title IV-E Tuition Authorization from the Utah State University Social Work program, in the amount of \$\_\_\_\_\_ for social work related courses for two semesters (\$\_\_\_\_\_ per semester) during the \_\_\_\_\_/\_\_\_\_\_ academic year beginning \_\_\_\_\_.

I understand this Tuition Authorization is supported from training funds provided to the Utah State University Social Work program by the Utah Department of Human Services, Division of Child and Family Services (DCFS) under Federal Title IV-E legislation and regulations. This legislation provides funds for training professional social workers in the field of child welfare.

In accepting this Tuition Authorization, I agree to the following conditions:

1. To maintain continuous enrollment, in good academic standing, in the Utah State University Social Work program, baccalaureate Social Work (B.S.W.) program during the period Title IV-E Tuition Authorization funds are provided.
2. Upon completion of my B.S.W. degree requirements at the Utah State University Social Work program, I will begin employment with DCFS, from the date the Utah State University Social Work program certifies the requirements are completed for twelve months if I am employed full-time and twenty-four months if I am employed part-time to repay the Title IV-E Tuition Authorization support.
3. To reimburse Title IV-E Tuition Authorization funds received in the event I fail to fulfill the academic requirements, or employment requirements and commitments outlined in this Agreement, to wit:
4. To make arrangements with the Department of Human Services to repay these funds within 30 days of the date I decline employment or officially withdraw or am terminated from the B.S.W. program.
5. To return, on a prorated basis, Tuition Authorization monies received should I choose to leave DCFS employment or should I be terminated from employment prior to fulfilling my employment commitment. I will repay these funds through the Department of Human Services.

Should legal action be required to collect Title IV-E Tuition Authorization funds, I will be liable for all costs incurred through this action.

If Title IV-E Tuition Authorization support to the Utah State University Social Work program is terminated for any reason while I am enrolled in the B.S.W. program, neither the Utah State University Social Work program nor DCFS will be liable to make any further Tuition Authorization payments to me.

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Student Name (print or type) Social Security Number

On this \_\_\_\_ Day of \_\_\_\_\_, 20\_\_ , before me \_\_\_\_\_, a notary public,  
personally appeared \_\_\_\_\_ and proved to me on the basis of satisfactory evidence  
to be the person whose name is subscribed to this instrument, and acknowledged that (s)he  
executed the same.

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\_\_\_\_\_  
Notary Public

My Commission Expires:

APPROVAL:

\_\_\_\_\_  
Director, Utah State University Social Work program Date

\_\_\_\_\_  
Director, Division of Child and Family Services Date

Your Information:

Address \_\_\_\_\_

Phone: \_\_\_\_\_

Contact information: (Nearest relative not living with you)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_