

**University of Toronto,  
Division of Human Resources & Equity,  
Educational Assistance Application for  
Professional Managerial, Confidential &  
Research Associates (PM/Conf., R.A.)**



**Submission Instructions**

Please submit this completed form to the Centre for Learning, Leadership  
& Culture via email to llc.funds@utoronto.ca

EMPLOYEE INFORMATION											
EMPLOYEE GROUP		<input type="checkbox"/> PM <input type="checkbox"/> CONF. <input type="checkbox"/> RAs			CAMPUS		<input type="checkbox"/> St. George <input type="checkbox"/> UTM <input type="checkbox"/> UTSC				
FIRST NAME							LAST NAME				
PERSONNEL #						EMAIL				PHONE #	
DEPARTMENT NAME & ADDRESS											
COURSE INFORMATION – applications to be completed on a course-by-course basis											
CATEGORY		<input type="checkbox"/> Educational Assistance - Credited Course <input type="checkbox"/> Educational Assistance - Non-Credited Job-Related Course									
CATEGORY		<input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input type="checkbox"/> Degree									
CATEGORY		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Master's									
CERTIFICATE, DIPLOMA OR DEGREE NAME											
COURSE NAME/CODE											
INSTITUTION NAME						DELIVERY		<input type="checkbox"/> ONLINE <input type="checkbox"/> IN-CLASS			
DURATION: FROM (m/d/yyyy)				TO (m/d/yyyy)				LOCATION			
TUTION FEE (before Misc. fees & taxes)											
DEPARTMENT HEAD APPROVAL											
DEPARTMENT HEAD NAME & TITLE											
PHONE#				DATE				AUTHORIZED SIGNATURE			
LLC APPROVAL - For Office Use Only											
EMPLOYMENT DATE				APPOINTMENT PERCENTAGE							
AMOUNT OF FUNDING						DATE					
AUTHORIZED SIGNATURE											
FOR OFFICE USE ONLY		DOCUMENT #				GL				CC	
AUTHORIZED SIGNATURE						DATE:					