Cleveland State University CONTINUING EDUCATION Staff Development Program

Employee					CS	SU ID#	
Permit Address	Last	F	irst	MI			
	Number	S	treet	City	Sta	ate Zip mester	
Departme	nt	_ (Campus Phone			year	
CHECK ONE: This person is appointed to a <u>full-time position and in ACTIVE status as of the first day of the semester</u> for which benefits are being applied, and is eligible for Staff Development Program benefits.							
	This person is appointed to a part-time position regularly scheduled to work 20 or more hours/week and in ACTIVE status as of the first day of the semester for which benefits are being applied, and is eligible for Staff Development Program benefits. (Note: Benefit is NOT available to Lecturers/Adjuncts)						
	This person is an eligible RETIREE (An eligible retiree is one who retires from <u>Full-time</u> active service after at least 5 years of service). <u>Obtain signature from the Department of Human Resources AC 113</u>).						
CHECK ONE: Course(s) will be taken during UNPAID time and will not conflict with regular responsibilities.							
Course(s) are currently unavailable during non-working hours. In management's judgment, the course will contribute significantly to the maintenance and improvement of job performance. The employee may be excused total hours with pay to attend ONE course.							
COLLEGE OFFERING CE COURSE							
	usiness odev.business@csuohio.edu		CLASS classce@csuohio.ed	<u>lu</u>		JerOnline Courses wkfcedev@csuohio.edu	
	OSHP oshpce@csuohio.edu		Ed2Go Courses prodev.business@c	suchio adu		DEI Certificate	
Ec	ducation casal@cuohio.edu		Engineering n.pratt@csuohio.ed			k.h.taylor@csuohio.edu ESL eslce@csuohio.edu	
Pe	ealth and Human erformances hperd@csuohio.edu		Law cle@law.csuohio.ec	<u>du</u>		Nursing cenursing@csuohio.edu	
	ecreation Center .m.rieger@csuohio.edu		Teaching Academy			Urban levinadmin@csuohio.edu	
List only those courses being taken under the CONTINUING EDUCATION Staff Development Program 8 CREDIT HOUR (IN-STATE UNDERGRAD) EQUIVALENT MAXIMUM							
EMPLOYEE IS RESPONSIBLE FOR ANY CHARGES OVER LIMIT Course Name Start Date Days & Hours Price							
	Course Name		Start Date	Days &	z Hot	ırs Price	
my signature below, I attest that my enrollment for the above mentioned semester does not exceed the 8 credit hour (or equivalent) combined uximum limit for CE + credit based courses. I understand that any overage will be billed to my student account with the University.							
FACULTY/STAFF MEMBER SIGNATURE DATE CHAIRPERSON, DEAN, DEPARTMENT HEAD, HR¹ 1 Human Resources signs for retirees of the University							