

RETRAINING/EDUCATIONAL OPPORTUNITIES PROGRAM

Tuition Refund

Promark Company will administer the Retraining/Educational Opportunities Reimbursement Program for individuals who elect to leave Procter & Gamble. Some important facts concerning this program are as follows:

- Each individual is eligible for a retraining allowance of up to \$5,000 over a two-year period which commences on the last day of work.
- The Education Coordinator at Promark Company will be the main contact for individuals for approval of training requests and for reimbursement requests once the training has been successfully completed.
- Tuition costs at accredited colleges, trade or vocational schools will be covered.
- Program allows for reimbursement of **Tuition, Registration and Lab fees ONLY**. Textbooks, supplies and exam fees **will NOT** be reimbursed.
- It is important for you to know that reimbursement payments for tuition and fees **are taxable income to you.**

How It Works:

- Obtain Form 101 -- Request for Approval Form from the Education Coordinator, complete information in Section A and return to the Education Coordinator, **prior to the start of the class.** It is required that you submit a separate form for each class you would like reimbursement for.
- Once approved, you will receive notification of approval.
- Following the course, to receive payment, you must complete Section C of Form 101 and submit **proof of your payment of covered fees and proof that the course was successfully completed** (such as a transcript or certificate) on the same Request for Approval Form.
- A check will be issued to reimburse you for covered expenses and sent directly to you. Checks are issued twice a month for reimbursements.
- **For more information, please contact:**

Education Coordinator
Promark Company/OI Partners
Baldwin 200
625 Eden Park Drive, Suite 875
Cincinnati, OH 45202
Phone: (513) 768-6500 or (800) 788-1544
Fax: (513) 768-6519

Request for Approval Form
RETRAINING/EDUCATIONAL OPPORTUNITIES PROGRAM

INSTRUCTIONS FOR APPROVAL AND PAYMENT

1. Approval -- **Complete Section A of Form 101** -- Request for Approval. When requesting authorization, submit form to Promark Company, Baldwin 200, 625 Eden Park Drive, Suite 875, Cincinnati, OH 45202; E-mail to rahm@promarkoi.com or fax to the Education Coordinator at (513) 768-6519.
2. Payment -- **Complete Section C of Form 101** - Request for Approval. To be reimbursed, submittal of proof of satisfactory completion/grades and proof of payment is required. Please submit to the Education Coordinator at the same address.
3. If any questions arise, please contact the Education Coordinator at (513) 768-6500 or (800) 788-1544.

A. Application For Approval -- Submit prior to beginning of course(s). (Please Print or Type)

I hereby request authority to attend the following course(s). I understand that Promark Company will administer the program to reimburse me up to \$5,000 over a two year period of time, commencing on my last day of work, for tuition, registration and laboratory fees **ONLY**, upon receipt of a statement from the school showing that the course(s) was (were) completed successfully in an unqualified manner as recognized by the school, and appropriate tuition and fees have been paid.

Name (Last, First, Middle Initial)	Social Security No.	Most Recent Position or Job Assignment
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New Address

Home Address (Street, Apt. #)	City	State	Zip Code
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Home Phone #	Work Phone #	Last Day of Work at P&G
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Requested Course(s): If you are in a Degree Program, please indicate type of Degree and field of study

Name of School	Phone Number of School
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Address of School (Street)	City	State	Zip Code
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Total amount requested for all courses listed below including registration and lab fees: _____

Total amount previously received under this retraining/educational refund program: _____

Title of Course(s)	Course #	Date Begins	Date Ends	Recognition to be Gained
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- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

B. Authorization of Application (For office use only)

Authorization Number: _____

By: _____

Date: _____

C. Payment Request

I have attached evidence of successful completion of the course(s) described above and proof of payment detailing tuition, registration and lab fees only.

Student's Signature: _____

Date: _____

Total Amount Requested: _____

D. Payment Approval (For office use only)

Approved for Payment: _____ Approved By: _____ Date: _____

Check #: _____ Date Sent: _____