PURPOSE

To delineate responsibilities in the training application process.

To define eligibility and training qualifying for state funding.

To provide a standardized process for training requests.

POLICY

To promote high quality service to the public, state employees are encouraged to improve job performance, and to prepare for increased responsibilities, through training and educational opportunities. State funding may be made available for qualifying courses, programs and conferences which will increase job skills and/or enhance employee knowledge, or which are necessary to meet the education requirements for continuing licensure/certification. The suitability of training requests will be evaluated in light of employee job performance and development goals, and benefit to SDS operations. In most cases, suitable training is approved; however, because unforeseen circumstances may occur between the time a training request was approved and the actual date of the training, the SDS director may find it necessary to rescind approval.

RESPONSIBILITIES

A. The employee is responsible for:
   1. identifying training opportunities and securing course information;
   2. submitting a training application to his/her supervisor;
   3. coordinating with administrative staff regarding course registration and travel planning;
   4. preparing a training summary and report on training materials; and
   5. discussing with his/her supervisor or the Training Program Coordinator the possibility of sharing training materials.

B. The supervisor is responsible for:
   1. with the employee, setting training goals/objectives during the staff development and evaluation process;
   2. evaluating the suitability of the requested training for the employee and for the benefit to SDS;
   3. approving or disapproving the training application;
   4. forwarding the training application and course information to the Training Program Coordinator;
   5. when requested, providing written justification to the Training Committee; and
   6. discussing with the employee the possibility of sharing training materials.

C. The program unit manager is responsible for reviewing the application and approving the training by initialing the form.
D. The **Training Program Coordinator** is responsible for:
   1. serving as the SDS resource for training and training policy;
   2. serving on the Training Committee;
   3. arranging Training Committee meetings to evaluate training applications;
   4. notifying the employee and supervisor of training approval or denial;
   5. maintaining a database related to training applications and expenditures;
   6. preparing annual training budget recommendations and semi-annual revisions;
   7. developing program reports on training activities, accomplishments, and statistics, and submitting them quarterly or as needed to the Administrative Manager or designee; and
   8. submitting Training Completion Forms to the Assistant Commissioner for Finance and Accountability.

E. The **Administrative Manager** or designee is responsible for:
   1. evaluating training applications as a member of the Training Committee; and
   2. approving the annual training budget and semi-annual revisions.

F. The **Training Committee** is responsible for:
   1. evaluating the suitability of the requested training for the employee and/or program unit or SDS need;
   2. requesting justification from the supervisor when additional information is needed for a decision;
   3. ensuring training decisions comply with SDS policy; and
   4. presenting applications to the Director or designee for final approval or denial.

G. The **Director** or designee is responsible for:
   1. approving or denying training applications;
   2. authorizing exceptions to training policies and procedures; and
   3. rescinding approval when necessary.

**ADMINISTRATION SPECIFICS**

**A. Funding availability.**

1. All SDS staff are eligible for state-funded training, and may submit training applications.

2. Priorities for approval of courses, programs and conferences.
   a. Those necessary to maintain licensure/certification required by the employee’s job classification, or by state or federal regulations.
   b. Those which will provide training directly related to the employee’s position and which will improve his/her skills, expertise, and job performance.
   c. Those which will provide training that, although not directly related to the employee’s position, would benefit his/her program unit or SDS.
3. Funded training expenses.
   a. Registrations fees.
   b. Professional licensing/certification programs offered by an accredited college or university, or a professional association approved by the supervisor (in consultation with the Training Committee if necessary).
   c. Tuition for courses offered by an accredited college or university or by an educational organization or business approved by the supervisor (in consultation with the Training Committee if necessary).
   d. Supplies (books or other required materials).
   e. Per Diem (meals and lodging).
   f. Travel to and from training site, including car rental or mileage.

4. Funding is not available for:
   a. Professional license/certification renewal fees.
   b. Organization/association membership fees.
   c. Fees for admissions tests (e.g., GRE, MCAT or LSAT).

B. Training Committee

1. The following SDS staff serve on the committee: Deputy Director, Administrative Manager or designee, Training Program Coordinator, and a unit program manager.

2. Unit program managers serve on a rotating basis for a period of one year.

PROCEDURES

A. Application Process.

1. After identifying a training opportunity which will benefit the employee, his/her program unit, or SDS, the employee obtains course information describing the content.

2. The employee prepares and submits a Training Certification and Agreement (Attachment A), with copy of the course information describing content, to his/her supervisor for review.

3. The supervisor evaluates the suitability of the training in light of employee job performance and development goals, and the benefit to the program unit or SDS.
   a. If there is no cost to the state other than employee absence from work during training, the supervisor may approve the training.
   b. If employee job performance is not at an acceptable level, the training is not approved unless it is designed to address job performance issues.
   c. If the supervisor approves, he/she signs the Training Certification and Agreement.
   d. If the supervisor does not approve the training, he/she provides reasons to the employee.
4. The supervisor discusses the proposed training with, and obtains the signature (initials) of, the unit manager.

5. The supervisor forwards the training application and course information to the Training Program Coordinator whether the training is approved or not.

6. The Training Program Coordinator makes arrangements for a Training Committee meeting.

7. The Training Committee reviews the training application and course information, and, if necessary for a decision, requests a justification for the training.

8. When requested, the supervisor prepares a written justification, relating course content to employee goals or program unit/SDS need, for the Training Committee.

9. If the Training Committee approves, its recommendation and the training application are given to the Director or designee for final approval.

10. If the Training committee or the Director or designee does not approve, the Training Coordinator will notify the employee of the reasons for the decision.

**B. Director Rescission of Approval.**

1. When necessary, the Director or designee rescinds approval for training when unforeseen circumstances occur between the time of initial approval and the date of the training.

2. The Director or designee informs the employee of his/her decision in writing, giving the reasons for the rescission of approval.

**C. Post-training Requirements.**

1. Upon returning to work, the employee prepares a *Training Completion Form* (Attachment B) and submits it to his/her supervisor.

2. The employee discusses with his/her supervisor the possibility of distributing relevant training materials or making a presentation to other employees.

3. The supervisor signs the *Training Completion Form* and forwards the form to the Training Program Coordinator with recommendations regarding the dissemination of training materials to other staff.

4. The Training Program Coordinator obtains and distributes the training materials to others who might benefit or arranges for an employee presentation.
D. Training Funds Tracking and Budgeting.

1. The Training Program Coordinator enters information regarding training applications, approvals, and expenses into the SDS Internal Training Requests Log.

2. The Training Program Coordinator reviews *Training Completion Forms* and forwards them to the Assistant Commissioner for Finance and Accountability.

3. The Training Program Coordinator prepares an annual training budget recommendation and semi-annual revisions, and submits them to the Administrative Manager or designee.

4. The Administrative Manager or designee reviews and approves the annual training budget and semi-annual revisions.

Attachments

1. Attachment A: Training Certification and Agreement
2. Attachment B: Training Completion Form
DEPARTMENT OF HEALTH AND SOCIAL SERVICES

TRAINING CERTIFICATION AND AGREEMENT

Employee: __________________________ SSN: __________ Division: SDS

Mailing Address: __________________________ (only necessary if taking a State course sponsored by PIC)

Position Title: __________________________ Work Phone Number: __________________________

Course Title: __________________________ Location: Anchorage

Name and Address of INSTITUTION or ORGANIZATION offering course: __________________________

Course DATES and HOURS: __________________________

Does course occur during office hours? No ☐ Yes ☐ Credit Hours: _______

Tuition: $ _______ Supplies: $ _______ Per Diem: $ _______ Travel: $ _______

Are funds specifically budgeted for training? No ☐ Yes ☐

Funding Source: __________________________ Account Code: __________________________

Will reimbursement be made to the employee, or directly to the institution or organization? (PLEASE INDICATE!!)

STATE COURSES: PLACE NOMINATION THROUGH JUNEAU TRAINING OFFICE.

OTHER COURSES: PLACE NOMINATION DIRECTLY TO INSTITUTION OR ORGANIZATION.

Justification/Recommendation: __________________________

______________________________________________________________

The cost of authorized expenses and work days taken as stated above will be paid by the State upon submission of receipts and proof of satisfactory completion of the course. In the event the course is not satisfactorily completed, all State costs will be reimbursed by the employee. Termination for reasons due to misconduct or delinquency on the part of the employee shall not excuse the employee from liability for reimbursement as specified above. The State of Alaska shall have the right to deduct from the undersigned employee’s final paycheck any monies owing the State in accordance with the above terms or to recover such monies by other legal means.

Employee Signature: __________________________ Date: __________________________

Supervisor Signature: __________________________ Date: __________________________

☐ Approved ☐ Disapproved (Reasons must be provided to employee)

Signature: __________________________ Date: __________________________

Director/Separate Office Head/Designee

cc: Training File/Junefau Division of Administrative Services
Employee File/Servicing Personnel and Payroll Office

Rev. 07/95
It is agreed between the State and ________________________, the employee, that the cost of authorized expenses (itemized below) for the following training course(s) ___________________________ will be paid by the State upon submission of receipts and proof of satisfactory completion of the course. In the event the course is not satisfactorily completed, all State advances will be reimbursed by the employee.

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It is also agreed that if the employee terminates employment with the State of Alaska in less than two years after completion of training, unless termination is result of death, prolonged illness, disability, unacceptability of the employee to the State, or other circumstances beyond the control of the employee, the employee will reimburse the State an amount of the itemized expenses in accordance with the following schedule:

- (A) 100% if termination occurs before completing 6 months
- (B) 75% if termination occurs after 6 months & before 12 months
- (C) 50% if termination occurs after 12 months & before 18 months
- (D) 25% if termination occurs after 18 months & before 2 years
- (E) 0% if termination occurs after 2 years

Termination for reasons due to misconduct or delinquency on the part of the employee shall not excuse the employee for liability for reimbursement within the limits specified above.

It is further agreed that the State of Alaska shall have the right to deduct from the undersigned employee’s final paycheck any monies owing the State in accordance with the above terms or to recover such monies by other legal means.

**SIGNATURES**

1. 
   EMPLOYEE ______________________
   DATE ______________________
   CITY ______________________
   DEPARTMENT ______________________

2. 
   APPOINTING AUTHORITY ______________________
   DATE ______________________
   CITY ______________________
   DEPARTMENT ______________________
STATE OF ALASKA
DEPARTMENT OF HEALTH AND
SOCIAL SERVICES
TRAINING COMPLETION
FORM

DATE:

TO:

RE:

This memo certifies that the employee has completed the following course:

EMPLOYEE:

SSN:

DIVISION:
LOCATION:
COURSE TITLE:
INSTITUTION OFFERING THE COURSE:

DATES OF COURSE:

Signature of Supervisor: __________________________ Date: ______________________