

## **MODE EDUCATION & TRAINING REIMBURSEMENT PROGRAM:**

### **Section 1: ELIGIBILITY**

- a. Public and Non-Profit full MODE members in good standing (current on its dues payment schedule).
- b. Reimbursement cannot be equal to or more than annual dues paid by each particular community/entity.

### **Section 2: COURSE ELIGIBILITY**

- a. Priority is given to programs that award credit towards professional certification in economic development-related professions.
- b. Priority organizations are: IEDC, OEDA, CDFA, OU/EDI, NDC, MAEDC, ICMA, UEDA, NLC.
- c. Secondary organizations are: NAIOP, SIOR, ICSC, CoreNet, IAMC, Chambers of Commerce.
- d. Webinars, conferences and training courses are all acceptable courses.

### **Section 3: BUDGET FOR TRAINING PROGRAM**

- a. The MODE Board shall allocate an annual budget to provide financial assistance for training, as funds are available.
- b. Per person annual reimbursement is capped at \$2,000, unless the MODE board makes an exception and funds are available OR if in 4<sup>th</sup> quarter funds remain available and uncommitted, education committee chair may use own discretion to fund up to additional \$500.

### **Section 4: APPLICATION PROCESS**

- a. Those wishing to receive MODE funding for training should submit the course agenda, conference itinerary, or training description/overview a minimum of 60-90 days in advance to the MODE Education Committee Chair, and must receive approval in writing.
- b. An application must be submitted to the MODE Education Committee Chair prior to attending a professional development/education course or conference in order to be considered for funding.
- c. The MODE Education Committee Chair shall inform the MODE Treasurer of approved applications.

### **Section 5: ELIGIBLE EXPENSES FOR REIMBURSEMENT**

- a. The cost of the conference/course/class will be eligible for reimbursement (early-bird registration cost is preferred).
- b. Additional costs for out-of-town courses (air fare, overnight accommodations) also will be eligible for reimbursement, depending on how remote the location. Air and hotel costs incurred no more than one day prior to and one day after the conference/course are eligible (to allow travel time to/from destination).
- c. No food, beverages or other travel incidentals (airport parking, checked baggage fees, gas, mileage, taxis, tips, shuttle service, etc.) will be eligible to be covered by this program.
- d. The Member attending the course/conference shall make every attempt to make travel arrangements well in advance in order to minimize travel expenses. The Board reserves the right to make partial reimbursement if the aforementioned item is not satisfied.

### **Section 6: REIMBURSEMENT PROCESS**

- a. Those approved Members who attend a course/conference will be required to submit documentation of eligible expenses, course completion/attendance and receipts to the MODE Education Reimbursement Program chairperson in order to receive reimbursement.
- b. No reimbursement shall be offered to Members who do not complete a scheduled course/conference.
- c. If the reimbursement check being requested is directed to an individual Member instead of an organization, the Member must have its organization sign a form ensuring the organization is not providing the same reimbursement (form available from chairperson).

## **APPLICATION FOR EDUCATION & TRAINING REIMBURSEMENT**

### **PUBLIC SECTOR/NON PROFIT MEMBER INFORMATION**

**Name:**

**Organization:**

**Mailing Address (for reimbursement):**

### **COURSE/CONFERENCE INFORMATION**

**Name of Course/Event/Conference and Host organization:**

**Date:**

**Location:**

**Details (Please attach a copy of the agenda and fee for course/conference):**

### **REIMBURSEMENT REQUEST INFORMATION**

**Course Registration Fee:**

**Proposed Travel Expenses (please attached copy of air fare estimate):**

**Proposed Hotel Expenses (please attach copy of hotel estimate):**

**Submit Completed form and attachments to:**

Sean Hughes, Economic Development Director and Business Concierge, City of Delaware | [shughes@delawareohio.net](mailto:shughes@delawareohio.net)

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**SUBMISSION RECEIVED (DATE):**

**APPROVAL**

**DISAPPROVAL**

**Reasoning:**