

APPENDIX IV – 65

TUCSON UNIFIED SCHOOL DISTRICT
“TUSD/UA Educational Leadership Cohort”
AGREEMENT
Part of the GROW OUR OWN Program
SCHOOL YEAR 2015-2016

PURPOSE: This agreement is entered into between the TUCSON UNIFIED SCHOOL DISTRICT (TUSD) and «Fname» «Lname», «EmpID», (Employee) for the purpose of defining both the TUSD’s and Employee’s rights and obligations arising out of Employee’s participation in the “Grow Your Own” TUSD/UA Educational Leadership Cohort (Program) in which TUSD provides tuition assistance for the first year of the two-year program.

TUITION ASSISTANCE: As represented in the table below, assistance up to the amount of \$2,531.55 will be provided for the first semester of year 1 and, up to the amount of \$5,063.10 for the second semester of year 1 for a total of \$7,594.65.

	<i>Year 1</i>		<i>Summer</i>	<i>Year 2</i>		<i>TOTAL</i>
	<i>Fall</i>	<i>Spring</i>		<i>Fall</i>	<i>Spring</i>	
<i>TUSD Portion</i>	2,531.55	5,063.10	0	0	0	7,594.65
<i>UA Portion</i>	400.00	500.00	0	600.00	700.00	2,200.00
<i>Individual Portion</i>	2,131.55	-500.00	5,504.00	4,463.10	4,363.10	15,961.75

TERM OF AGREEMENT: This agreement is for the 2015-2016 through the 2016-2017 school years. All course obligations must be completed by the end of the 2016-2017 school year.

TUSD’s OBLIGATIONS:

1. **TUITION ASSISTANCE:** TUSD agrees to pay up to the amount of \$2,531.55 to the University of Arizona towards the Employee’s for fall semester Year 1 tuition and, up to the amount of \$5063.10 for the spring semester Year 1.
2. **PAYMENT SCHEDULE:**
 - (a) Fall tuition will be processed in August
 - (b) Spring tuition will be processed in December
4. **CHANGES TO THE PROGRAM:** TUSD reserves the right to change or discontinue this program in successive years and agrees to notify Employee in a timely manner of any changes or plan to discontinue this program. There is no guarantee that this program will be continued in successive years.

EMPLOYEE OBLIGATIONS:

1. **ENROLLMENT:** Employee agrees to apply and be accepted into the University of Arizona’s Graduate College and complete a Master of Education in Educational Leadership within two-years of signing this agreement.

2. EMPLOYEE: Upon obtaining a Master of Education in Educational Leadership, Employee agrees to obtain an Arizona Principal Certificate and apply for all vacant site administrative positions. Employee will continue employment within TUSD for the agreed upon support years as defined below.
3. SUPPORT YEARS: Employee agrees to continue employment with TUSD for two years after completion of Masters program and obtaining Arizona Principal Certification.
4. Employee agrees that this Agreement controls over any Employee Agreement between the District and any employee organization or group, now or in the future.
5. DEFAULT: Unless otherwise provided in this Agreement, Employee agrees to fully repay the District for the tuition assistance directed to the Employee if Employee does not complete the required number of support years within the District under the terms and conditions specified in the is agreement. If Employee resigns or transfers from his/her current position before the completion of the required support years, Employee agrees to have the required payment deducted from a final paycheck or to arrange to repay the District in monthly installments.

AMENDMENTS: Any and all amendments to this Agreement must be in writing and signed by TUSD’s SR. Director of Curriculum Deployment.

CONFLICT RESOLUTION: Disagreements between TUSD and Employee that arise out of this Agreement shall be referred to the Deputy Superintendent Teaching and Learning and/or his or her designee for final resolution, subject to the right of either party to enforce this Agreement in court.

ENTIRE AGREEMENT: This Agreement is the full and complete agreement between Employee and TUSD concerning the “Grow Your Own” TUSD/UA Educational Leadership Cohort (Program)

Signed and dated this ____ day of _____, 201.

«Fname» «Lname» _____
Printed Employee Name

«EmpID» _____
Employee ID Number

Signature of Employee

Date

Signature of Program Administrator

Date