
DREYFUSS

Revised 8/20/25

Course Payment Agreement

(this form is only for courses that will be covered 100%, such as CAM, CAMT & CALP)

I, _____ (insert name of "Employee"),

agree to the following terms and conditions with _____

_____ (Legal Name of "Employer").

Name of Educational Course or Program:

Total Cost of Course: \$ _____ (send receipt of payment to the HR Director for reimbursement)

Course Start Date: _____ Course End Date: _____ Date of Final Exam: _____

It is agreed and understood that Employer will pay half of the cost upfront and half of the cost after Employee passes the final exam. If the exam is not passed and a fee is charged to retake the exam, then that fee is the sole responsibility of Employee.

It is agreed and understood that not completing and/or not passing the final exam within six (6) months of the course end date provided above will result in Employee being held responsible for paying back the amount already reimbursed for the course via payroll deductions, which Employee may authorize, or a one time payment via check or money order.

It is agreed and understood that if Employee's employment is terminated (voluntary or involuntary) before Employee gains the certificate/designation, Employee is being held responsible for paying back the amount already reimbursed for the course via payroll deductions, which Employee may authorize, or a one time payment via check or money order.

It is also agreed and understood if Employee's employment is terminated (voluntary or involuntary) less than 6 months after course completion, Employee is being held responsible for paying back the amount already reimbursed for the course via payroll deductions, which Employee may authorize, or a onetime payment via check or money order.

1st Reimbursement Amount: \$ _____ 1st Reimbursement Date: \$ _____

2nd Reimbursement Amount: _____ 2nd Reimbursement Date: _____

Certification Received: _____

Certification Not Received *Repayment Amount of \$ _____ Received On: _____

Any reimbursements due must be paid or arranged with ten (10) days of written demand from Employer. If Employer has to take legal action to collect any reimbursements due, Employer will be awarded its reasonable attorneys' fees and costs.

This is the entire agreement of the parties concerning its subject matter. No provision of this Agreement may be modified or waived except by a written instrument signed by both parties.

This Agreement must be approved by the Director of Property Management and the Human Resources Director before Employee signs up for the course.

| | | |
|-----------------------------------|-----------------------|---------------|
| _____ Employee Signature | _____ Printed Name | _____ Date |
| _____ Director of PM Signature | _____ Printed Name | _____ Date |
| _____ HR Director Signature | _____ Printed Name | _____ Date |

**EQUAL
OPPORTUNITY
EMPLOYER**
