

MARYLAND DEPARTMENT OF HEALTH

# WORK STUDY PROGRAM

## CAREER DEVELOPMENT PLAN

### REMINDERS/INSTRUCTIONS

- Letter of acceptance into the respective educational program
- List the estimated completion date of your educational program where you will have earned a degree or certificate.

## APPLICATION/SCHEDULE

### REMINDERS - INSTRUCTIONS

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- The prospective participant must be in a permanent position working full-time or part-time (working at 50%).
- The prospective participant cannot be in any type of probationary period.
- You are not permitted to work a condensed work schedule to attend courses unless you have a condensed schedule on record in MDH's Office of Human Resources Payroll unit.
- Release time does not include study time.
- You must apply for only one semester at a time.
- Travel to and from the college must be accounted for respectfully and employees must use their own leave for travel.
- Asynchronous online courses are not eligible for this program since they can be taken at any time.
- Employees are not allowed to claim overtime or comp time when listing work study on timesheets.
- To sign off as an appointing authority, you must be listed as such by Human Resources.

#### INSTRUCTIONS/ADDITIONAL FORMS REQUIRED

- Complete and sign all sections of the Application/Schedule.
- You must list your regular work hours and percentage of time employed.
- The prospective participant's Performance rating must be "Satisfactory" within the six months of the application submission. If no PEP is on file, the supervisor is required to write a letter indicating satisfactory performance.
- The Educational Institution/Facility must be accredited by the US Department of Education and proof of the accreditation must be included in the first application packet only unless the institution/facility changes.
- Attach a copy of the official college course description (not a student schedule). The dates and times for each class must be included and must match what is listed on the Application/Schedule.
- If you are participating in an internship or clinical program, please provide a copy of the acceptance letter from the institution/facility where the program will be conducted. This must be on the institution/facility's official letterhead and must include the dates and times the program will take place. If the internship or clinical schedule will change during a semester, you must submit an additional application/schedule for that period.
- If your application request is approved, you must submit copies of approved times sheets by the 15th of each month.

## OBLIGATED SERVICE AGREEMENT

This agreement states that the salary received while participating in the Work Study program is a loaned salary paid by the Maryland Department of Health and must be repaid in service (work) hours or by cash if you leave the Department.