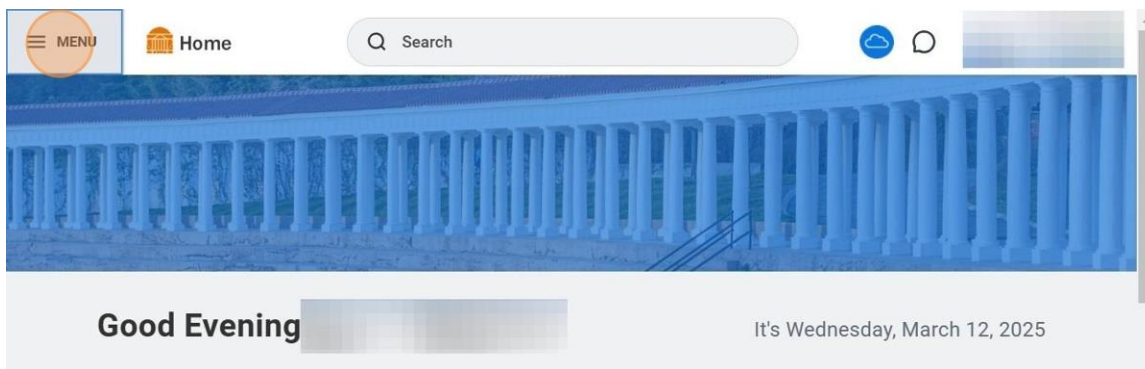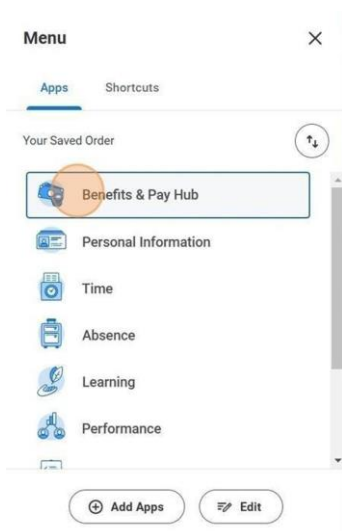# Employee Job Aid

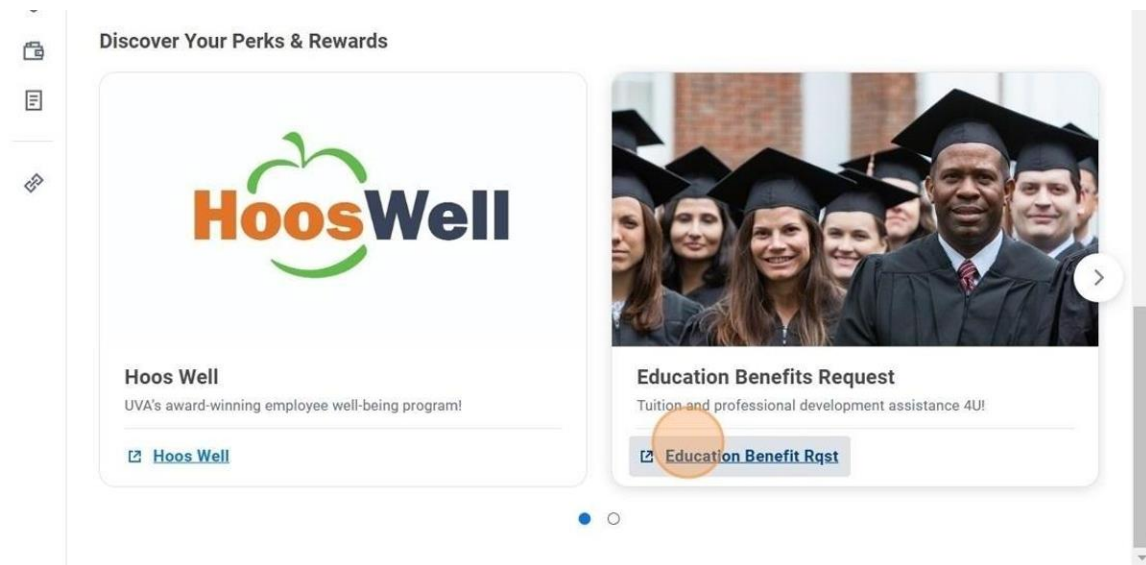## How to submit an education benefit request in Workday.

1. Once logged into Workday: Click "MENU"

2. Click "Benefits & Pay Hub"

3. Scroll down the page to locate the "Education Benefit Rqst" tile.

4. Click "Create New Request"
   To see requests prior to the current calendar year, click on "Previous Requests".

5. Select appropiate funding type here.
   Central: Request to be paid from Central Education Benefit funding.
   Departmental: Request to be paid by your department/cost center. *See "Manager Job Aid" for more details.*
   *If requesting multiple funding types submit separate requests.

TIP: If you are unsure of your request's eligibility, you are welcome to submit your questions to AskHR@virginia.edu

Program/Course Information

Funded By *

select one ▼ ?

Assistance Type *

select one ▼ ?

Program Type *

☰

Education Provider *

?

Total Amount Requested

0.00

Requested Amount Currency *

USD ▼

Add Course(s) 0 items

	Course Name	Start Date	End Date	Participation Type	Cost	
				No Data		

Submit   Cancel   Show Me How

6. Select appropiate "Assistance Type".
   Academic ONLY:
   When selecting "Professional Development" you will be required to clarify how the request is job-related. Please provide 3-4 sentences with this information.

7. Click the "Program Type" field.
   Depending on what is selected for "Assistance Type" will determine what options are available to be selected in "Program Type".

TIP: If you are unsure of your request's eligibility, you are welcome to submit your questions to AskHR@Virginia.edu

Program/Course Information

Funded By *

select one ▼ (?)

Total Amount Requested

0.00

Assistance Type *

select one ▼ (?)

Requested Amount Currency *

USD ▼

Program Type *

Search ≡

Education Provider *

[   ] (?)

Add Course(s) 0 items

	Course Name	Start Date	End Date	Participation Type	Cost

No Data

Submit   Cancel   Show Me How

8. Click the "Education Provider" field.
   Name of school, conference, etc. goes here

Central Funding ▼ (?)

0.00

Assistance Type *

Tuition ▼ (?)

Requested Amount Currency *

USD ▼

Program Type *

✕ Degree - Graduate ≡

Please specify the name of the [Degree - Graduate] *

Degree Info Here

Education Provider *

[   ] (?)

Add Course(s) 0 items

⊕	Course Name	Start Date	End Date	Participation Type	Cost

No Data

Legal Agreement

Submit   Cancel   Show Me How

9. To add details of event, click here.

Central Funding ▼ (?) 0.00

Assistance Type *
Tuition ▼ (?)

Requested Amount Currency *
USD ▼

Program Type *
× Degree - Graduate ☰

Please specify the name of the [Degree - Graduate] *
Degree Info Here

Education Provider *
Name of Provider (?)

Add Course(s) 0 items

	Course Name	Start Date	End Date	Participation Type	Cost
⊕					
		No Data			

Legal Agreement

Submit   Cancel   Show Me How

10. Name of class, program, etc. goes here

Please specify the name of the [Degree - Graduate] *
Degree Info Here

Education Provider *
Name of Provider (?)

Add Course(s) 1 item

	Course Name	Start Date	End Date	Participation Type	Cost
⊕					
⊖		MM/DD/YYYY	MM/DD/YYYY	select one ▼	0.00
					0.00

Legal Agreement

Please carefully read this statement.

I understand that I will receive a payment pursuant the Education Benefit Program. I agree to be responsible for prompt repayment of amounts paid to me or on my behalf pursuant to this benefit program if:

- I do not register for or stop attending a course, or otherwise fail to successfully complete the course for which I have received an education assistance disbursement
- I fail to provide an official grade report or appropriate documentation and a paid bill or receipt for tuition

Submit   Cancel   Show Me How

11. Include course/event name in this field.
    You can click the add button if multiple classes are being taken from the same program.
    If more than one course is being taken with the same provider and within the allowable
    window, please list all courses associated with funding.
    EX:
    Provider: UVA
    Class A 1/1/2025-12/6/2025
    Class B 5/6/2025-1/31/2026

12. Start/End dates are provided here.
    Medical Center Only:
    For credential certification renewals, please use the same start date and end date.
    Example: If renewal was on 1/1/2025, use this date as both the start date and end date.
    For "Participation Type" use "exam", course name "Renewal" and name of Certification.
    You will need to attach proof of payment and copy of certification.

Please specify the name of the [Degree - Graduate] *

Degree Info Here

Education Provider *

Name of Provider   ?

Add Course(s) 2 items

⊕	Course Name	Start Date	End Date	Participation Type	Cost
⊖	Class B	MM/DD/YYYY	MM/DD/YYYY	select one ▾	0.00
⊖	Class A			select one	0.00
					0.00

Legal Agreement

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Submit   Cancel   Show Me How

13. Select Participation Type

Please specify the name of the [Degree - Graduate] *

Degree Info Here

Education Provider *

Name of Provider (?)

Add Course(s) 2 items

	Course Name	Start Date	End Date	Participation Type		Cost
⊖	Class B	06/04/2025	10/31/2025	select one	▼	0.00
⊖	Class A	03/01/2025	06/30/2025	select one		0.00
						0.00

Legal Agreement

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Submit   Cancel   Show Me How

14. Enter costs here. Ensure you are not including ineligible expenses, such as: Membership, licenses, travel, food, lodging, parking/student activity fees, etc.

Please specify the name of the [Degree - Graduate] *

Degree Info Here

Education Provider *

Name of Provider (?)

Add Course(s) 2 items

	Course Name	Start Date	End Date	Participation Type		Cost
⊖	Class B	06/04/2025	10/31/2025	Online (Instructor Led)		0.00
⊖	Class A	03/01/2025	06/30/2025	Online (Instructor Led)	▼	0.00
						0.00

Legal Agreement

Please carefully read this statement.

I understand that I will receive a payment pursuant the Education Benefit Program. I agree to be responsible for prompt repayment of amounts paid to me or on my behalf pursuant to this benefit program if:

Submit   Cancel   Show Me How

15. Review legal agreement and click I Agree upon completion.

Legal Agreement

Please carefully read this statement.

I understand that I will receive a payment pursuant the Education Benefit Program. I agree to be responsible for prompt repayment of amounts paid to me or on my behalf pursuant to this benefit program if:

- I do not register for or stop attending a course, or otherwise fail to successfully complete the course for which I have received an education assistance disbursement
- I fail to provide an official grade report or appropriate documentation and a paid bill or receipt for tuition
- I leave my employment with the University of Virginia either voluntarily or involuntarily (for reasons other than layoff or furlough) before successfully completing the course or before reimbursing any amounts owed under the program

I agree that any amounts owed may be withheld from my paycheck(s), including any final paycheck, in compliance with minimum wage law requirements. I further understand that any amounts owed that cannot be recouped through paycheck withholding will be subject to collections action by the University, which is required by law to pursue all amounts owed to the University.

By clicking I Agree below, I affirm that I have read and understand this Agreement. Only those Education Assistance requests that affirm acceptance will be processed.

I Agree *

☐

Pressing Submit will finalize this portion of your request. Please double-check the information you entered above. Once submitted, you will not be able to revise it unless it is sent back to you.

Submit   Cancel   Show Me How

16. Click "Submit"

Please carefully read this statement.

I understand that I will receive a payment pursuant the Education Benefit Program. I agree to be responsible for prompt repayment of amounts paid to me or on my behalf pursuant to this benefit program if:

- I do not register for or stop attending a course, or otherwise fail to successfully complete the course for which I have received an education assistance disbursement
- I fail to provide an official grade report or appropriate documentation and a paid bill or receipt for tuition
- I leave my employment with the University of Virginia either voluntarily or involuntarily (for reasons other than layoff or furlough) before successfully completing the course or before reimbursing any amounts owed under the program

I agree that any amounts owed may be withheld from my paycheck(s), including any final paycheck, in compliance with minimum wage law requirements. I further understand that any amounts owed that cannot be recouped through paycheck withholding will be subject to collections action by the University, which is required by law to pursue all amounts owed to the University.

By clicking I Agree below, I affirm that I have read and understand this Agreement. Only those Education Assistance requests that affirm acceptance will be processed.

I Agree *

☑

Pressing Submit will finalize this portion of your request. Please double-check the information you entered above. Once submitted, you will not be able to revise it unless it is sent back to you.

Submit   Cancel   Show Me How

17. **Reimbursement:**
    If the request is for reimbursement (ie: event end date has passed, and you have paid for and completed the event already) the next screen will look like this. Here you need to provide proof of payment & completion.
    Click "Upload" or drag/drop files.
    If more than 5 documents, please merge PDF's or provide screenshots in a word document.
    Please also identify documents by using one of the following formats:
    "[EventName]_Payment" & "[EventName]_Completion" or "UVA_Payment" & "UVA_Completion".

Congrats! Looks like you've completed your course(s)!

Please upload the required Education substantiation (itemized invoice, proof of payment, and proof of passing grade/ n).

Program Type.png

Upload

Program/Course Information

Funded By

Central Funding

Assistance Type

Professional Development

Program Type

Total Amount Requested *

500.00

Requested Amount Currency

USD

OK   Cancel

18. Click "OK"

uva

Education Provider

uva

Please enter an explanation of how this relates to your job and a link to the program.

job info here

Course List (At least one course is required) 1 item

Name	Start Date	End Date	Participation Type
class	2025-01-31	2025-02-01	Conference

Powered By Workday Extend

OK   Cancel

19. Click "OK".

Name of the Other

uva

Education Provider

uva

Please enter an explanation of link to the program.

job info here

Course List (At least one course is

Name	Participation Type
class	Conference
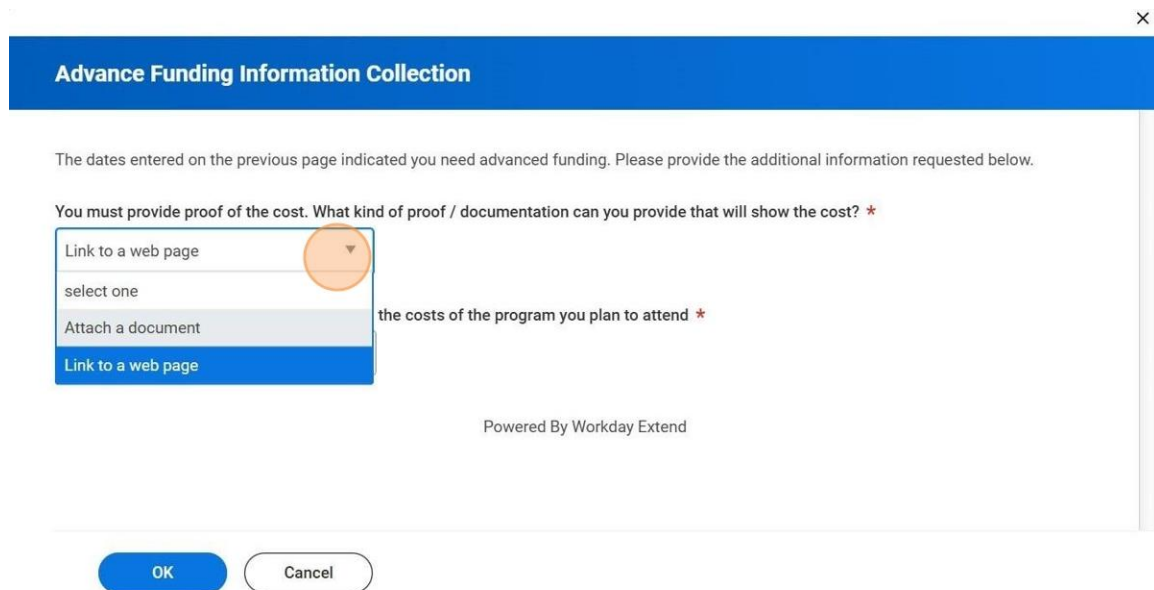
Education Benefit Request - Submit for Approval

Almost done!

Clicking OK will submit your request for approval.

Cancel   **OK**

Powered By Workday Extend

OK   Cancel

20. **Advanced Funding Requests** (event has not been completed): Click "select one" dropdown.
Select link or document.
Please do not provide links that require logins. Click "OK" upon completion.
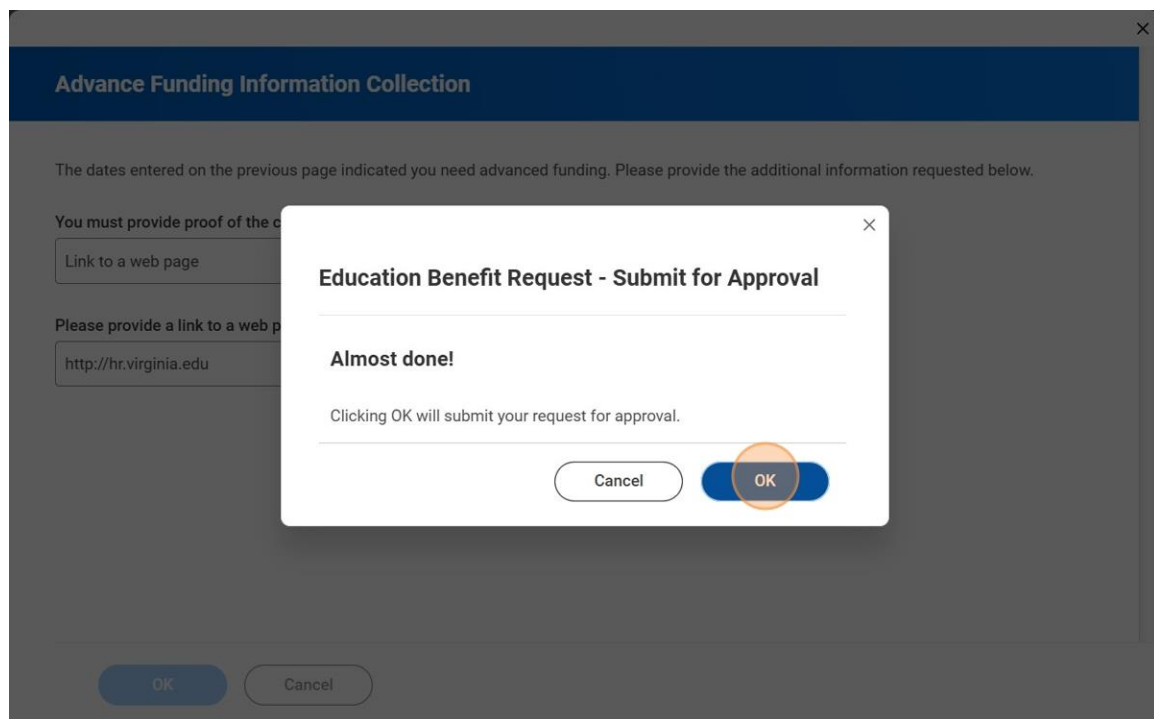
21. Click here. Once submitted it routes to HR for review.

22. How can I see my status?
Click the blue status link for further details...

23. Click "Process"

24. In the comment column, you can find comments which can include reasons it was sent back or why a request was denied.

25. Click "Proof of Completion - Not Due Yet"
This status means the end date has not passed up. Substantiation will be required after the end date has passed, see "Substantiation FAQ" for more details.