Microsoft Certification Voucher Agreement

This form is used to request a Microsoft IT Academy certification test voucher.

INSTRUCTIONS: **1.** Staff Member must submit a completed Agreement with his/her Supervisor's signature on it to Staff Development. **2**. If approved, Staff Member must work with his/her Supervisor to set up a schedule to study for the certification test, obtain Individual Development funds to cover the cost of any proctoring fee associated with the certification test, and make his/her own arrangements to take the test. **3.** Inform Staff Development of the results of the certification test within two weeks of taking it.

Name:	**Position:**
Dept/Library:	**@kcls.org email address**
Voucher Requested (check one) ☐ MOS Specialist Word ☐ MOS Specialist Excel ☐ MOS Specialist PowerPoint ☐ MOS Specialist Outlook ☐ Other: _____	**Is This Your First Voucher Request** ☐ Yes ☐ No ***If "No," is this for a re-test based on a failed certification attempt?*** ☐ Yes ☐ No

Specify how the requested voucher is related to your current position with KCLS:

STAFF MEMBER SIGNATURE

☐ I will work with my Supervisor to set up a schedule to study for the certification test.
☐ I will make my own arrangements to take the test at an authorized testing location.
☐ I will submit an Individual Development request to cover the cost of any proctoring fee.
☐ I will inform Staff Development of the results of the certification test within two weeks.

Staff Member Signature _____ Date _____

SUPERVISOR RECOMMENDATION

☐ I will work with the Staff Member to set up a schedule to study for the certification test.
☐ Staff Member has the ability to manage his/her job and study for the certification test.

Supervisor Signature _____ Date _____

STAFF DEVELOPMENT DECISION

☐ Approved
☐ Denied (Reason
_____)

Staff Development Signature _____ Date _____

Return Completed Form to Human Resources (Staff Development)