

Nursing Excellence Scholarship Reference Sheet

How to Request a Payment

Submit the following two documents to the Edelman Center:

1. A current, itemized tuition bill/screenshot of your account showing your full name, the school's name, and an itemized list of charges. See attached example.

AND

2. A screen shot of the email approval for your Inova tuition benefit and/or the zero balance on your account. See attached examples to determine what we need from you.

Where to Submit your Request

Payment requests are only accepted by email to inovainternalscholarships@inova.org.

Deadlines

- Please request payment as soon as you receive your Edcor approval. You do not need to wait until the end of the semester when Edcor pays. **Scholarship payments will not be processed before the end of the first week of class or outside of the calendar year with the exception of classes that occur in November and December. These classes will be paid in January.**
- Scholarships are paid according to the payroll schedule. No additional checks will be issued.
- No payments are made between November 1 and December 31.

What Your Scholarship Covers

Your scholarship may be used for approved tuition and nursing-related lab and technology fees incurred after the scholarship award date only. Your scholarship will not cover books, parking, travel, late fees or student fees. Study abroad programs are not covered. No retroactive payments.

Requirements and Limitations

- You will not be issued scholarship funds until you have exhausted your Inova tuition reimbursement (via Edcor).
- You must remain in a budgeted, benefit-eligible status. If you leave Inova within 1 years of receiving the scholarship, by choice or by termination, you may be asked to pay back your scholarship.
- Nursing Excellence Scholarships are taxable and must be reported on Form W-2.

Payment Schedule

| | | | | | | | |
|-----------|-----------|----------------|-----------|---|-----------|----------------|------------|
| Submit By | 1/28/2022 | For payment on | 2/11/2022 | Submit By | 6/17/2022 | For payment on | 7/1/2022 |
| Submit By | 2/11/2022 | For payment on | 2/25/2022 | Submit By | 7/1/2022 | For payment on | 7/15/2022 |
| Submit By | 2/25/2022 | For payment on | 3/11/2022 | Submit By | 7/15/2022 | For payment on | 7/29/2022 |
| Submit By | 3/11/2022 | For payment on | 3/25/2022 | Submit By | 7/29/2022 | For payment on | 8/12/2022 |
| Submit By | 3/25/2022 | For payment on | 4/8/2022 | Submit By | 8/12/2022 | For payment on | 8/26/2022 |
| Submit By | 4/8/2022 | For payment on | 4/22/2022 | Submit By | 8/26/2022 | For payment on | 9/9/2022 |
| Submit By | 4/22/2022 | For payment on | 5/6/2022 | Submit By | 9/9/2022 | For payment on | 9/23/2022 |
| Submit By | 5/6/2022 | For payment on | 5/20/2022 | Submit By | 9/23/2022 | For payment on | 10/7/2022 |
| Submit By | 5/20/2022 | For payment on | 6/3/2022 | Submit By | 10/7/2022 | For payment on | 10/21/2022 |
| Submit By | 6/3/2022 | For payment on | 6/17/2022 | No payments are made after 10/21/22 until January 2023 | | | |

Examples of Scenario 1: Edcor Balance \$0 Before Term Begins

Your Nursing School Logo

HOME | **MY DEGREE & COURSES** | **FINANCES** | **RESOURCES**

View Account Details

[Return to Full Page](#)

Your Nursing School Logo/information might be here

Your Name
Your Address

Date: 07/06/2014
Student ID: Your ID #
Term: 05/05/2014 - 06/29/2014

Dear

This letter details course registration and associated transactions for the May 2014 term. Please note that the registration and transactions reflected in this statement are reported as of the date reflected above. Any changes in registration may result in changes to the transactions listed below.

| Course | Title | Credits |
|--|-------------------------------|-------------------|
| NR390 | Nursing History | 2 |
| NR361 | RN Info Systems in Healthcare | 3 |
| Total Credit Hours for the May 2014 Session | | 5 |
| Student Service Charge | | \$150.00 |
| Chamberlain Undergrad Tuition | | \$2,950.00 |
| Installment Set Up Fee | | \$10.00 |
| Course Material Charge | | \$80.00 |
| Total Cost for the May 2014 Session | | \$3,190.00 |
| Corp Tuition Accommodation | | <\$442.50> |
| Total Due for the May 2014 Session | | \$2,747.50 |

Shows all courses are nursing-related.

Shows the breakdown of each charge and tuition amount. In this case, only the \$10 installment fee is not paid.

For further information about this account, please contact Student Finance.

Student Finance
888.556.8226
<http://help.devry.edu>

[Home](#)

[Education Discounts](#)

[Submit Application](#)

[Request Payment Application Status](#)

[User Profile and Remaining Benefit Limits](#)

[Program and Contact Information](#)

[Manager Application Approval](#)

[Benefit Discounts](#)



Hello **YOUR NAME HERE**

Welcome to the INOVA HEALTH SYSTEM Educational Assistance Program

[New Program Request](#)

[Start a New Application Here](#)

[Actions Needed](#)

Documents due by 10/28/2016 ID# 0100-0000-1880-6530 Term Start Date: 06/06/2016

[View All](#)

[Recent Activity](#)

| Date | Status | Term Start |
|------------|----------------------|------------|
| 05/25/2016 | Payment Issued | 01/19/2016 |
| 05/12/2016 | Application approved | 06/06/2016 |
| 05/19/2015 | Payment Issued | 01/20/2015 |

[View All](#)

[Your Account Information](#)

| Benefit Summary | | Available | |
|--------------------------------------|------------|------------------------|--------|
| MSN Tuition/Fees/Books | \$5,250.00 | MSN Tuition/Fees/Books | \$0.00 |
| BSN Tuition/Fees/Books | \$5,250.00 | BSN Tuition/Fees/Books | \$0.00 |
| Tuition/Fees/Books | \$3,000.00 | Tuition/Fees/Books | \$0.00 |
| Certifications | \$1,000.00 | Certifications | \$0.00 |
| Verify Email Address | | | |
| View Program Details | | | |

[View All](#)

(if this column does not show a \$0.00 balance, this amount will be deducted from your scholarship payment unless you can show that the payment is pending for a semester before the one for which you are requesting the payment)

[School Network](#)

[Learn how you can receive a discount on your tuition!](#)

[Learn how to save money on your books!](#)

- [New England College of Business Offers Free Principles of Management](#)
- [Columbia College offers Tuition Discounts](#)
- [Eddor's 2nd Quarter Newsletter](#)
- [College of William & Mary Joins the Eddor Preferred School Network](#)
- [Alabama State University Joins the Eddor Preferred School Network](#)
- [AIU Announces 2016 Term Start Dates](#)
- [CTU Announces 2016 Term Start Dates](#)
- [ADUS Outlines Military Programs and Support](#)

**Examples of Scenario 2:
Edcor Balance \$0 for
Beginning of Term But Does
Not Cover Full Term Cost**

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Hello **YOUR NAME HERE**

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[New Program Request](#)

[Start a New Application Here](#)

[Actions Needed](#)

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[View All](#)

[Recent Activity](#)

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| BSN Tuition/Fees/Books | \$5,250.00 | BSN Tuition/Fees/Books | \$0.00 |
| Tuition/Fees/Books | \$3,000.00 | Tuition/Fees/Books | \$0.00 |
| Certifications | \$1,000.00 | Certifications | \$0.00 |
| Verify Email Address | | | |
| View Program Details | | | |

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- [ADUS Outlines Military Programs and Support](#)

From: [Sullivan, Kate A.](#)
To: [Sullivan, Kate A.](#)
Subject: Sample
Date: Monday, April 21, 2014 10:16:43 AM

From: donotreply@tuitionstatusupdate.com [<mailto:donotreply@tuitionstatusupdate.com>]
Sent:
To:
Subject: Inova Educational Assistance Program - Application Approval

Inova Health System Educational Assistance Program
P.O. Box 550
Troy, MI 48099-0550

DATE

Re: **YOUR REQUEST NUMBER**

Dear **YOUR NAME**,

Congratulations! Your application for participation in the Inova Health System Educational Assistance Program for course(s) starting **DATE** and ending **DATE** has been approved.

If your course information, taxability, or tuition/fee dollars listed below should change for any reason, please go to the Application Status page on the Inova Health System Educational Assistance Program website and click Update for this application. This will allow you to adjust course information on the application.

To change the school name, term dates, degree, or major you will need to submit a new application. To cancel the original application, return to the website listed below, access the application status page and select the Cancel option. New applications will need to be completed in full with all required approvals. Please review your Company's policy guidelines for application submittal deadlines and other requirements.

Educational Institution: **YOUR UNIVERSITY**

Term Begin: **DATE** Term End: **DATE**

Course #: **00000** Course Name: NURS **COURSE**
Course Amount: 1,729.32 Job Related: N

Course #: **00000** Course Name: NURS **COURSE**
Course Amount: 1,210.68 Job Related: N

Course #: Course Name:

Course Amount: .00 Job Related:

Course #: Course Name:

Course Amount: .00 Job Related:

Approved Fees: 60.00

Total Approved: 5250.00 (if this does not total 5250.00 you must submit a screen shot of your Edcor homepage to show the total amount you are eligible to receive and a remaining balance.)

To ensure your tuition request is processed quickly, please make sure you submit a payment request/grade submission cover sheet with all the relevant documentation for the course(s) listed above. Documents received without a cover sheet will not be processed. Relevant documentation may include, but is not limited to grade reports and itemized receipts. Please refer to your Inova Health System Educational Assistance Program policy for additional guidelines for tuition assistance processing.

If you have questions or need assistance please call 800-326-0780 between 8:00 a.m. to 8:00 p.m. Eastern time, Monday through Friday, and a Customer Service Representative will be happy to assist you.

Sincerely,

Inova Health System Educational Assistance Program

<https://inova.tap.edcor.com>

Tracking Number: 0100000011588981