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Jeffrey A. Meyers  
Commissioner

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF THE COMMISSIONER

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October 1, 2019

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, to enter into an educational tuition agreement and to pay said costs in an amount of \$3,000.00 as follows:

Institution:	Southern New Hampshire University 2500 North River Road Manchester, NH 03106
Course Title(s):	1. Applied Statistics 2. Human Resource Management 3. Business Systems Analysis and Design 4. Principles of Management
Course Date(s):	Begin: 10/28/2019 End: 04/26/2020
Employee:	Brianna R. Wall
Funding Source:	05-95-95-953010-56770000-066-500544
Total Cost of Course(s):	\$3,456.00
State Share:	\$3,000.00
Source of Funds:	Employee Training, 25% Federal, 75% General

**EXPLANATION**

These courses, Applied Statistics, Human Resource Management, Business Systems Analysis and Design, and Principles of Management, will benefit the employee and the Department by enhancing Ms. Wall's overall understanding of management philosophies. In Applied Statistics Ms. Wall will apply statistical techniques to a variety of applications in business and the social sciences. Human Resource Management will examine the fundamentals of policies and administration, where maintaining and utilizing an effective team are the focus. Business Systems Analysis and Design will increase Ms. Wall's understanding of the roles and uses of information systems in an organization. Information relative to the concepts and methodologies associated with the development of business information systems will also be discussed, as will the relationship between organizations' structures and information technology. Principles of Management will give Ms. Wall a fundamental understanding of the fundamentals and principles of management in order to develop an understanding of management in any formal organization, with emphasis on planning and decision making.

Brianna Wall has been employed by the Department of Health and Human Services (DHHS), for over two (2) years and is currently an Executive Secretary at New Hampshire Hospital (NHH). Her duties include processing of payroll for NHH employees, managing the opening and distributing of mail, updating the Involuntary Emergency Admission (IEA) doctor list as needed to keep all information current. She is also responsible for managing the use of conference rooms and completing other office tasks as requested. The courses above are part of an Associate's Degree in Business Administration which will help Ms. Wall to further enhance her career options at NHH.

The Department of Health and Human Services encourages and supports employees who wish to further their professional growth through continuing education in disciplines that are mutually advantageous.

This course will not be taken on State time.

Attached is a fully executed Tuition Agreement for your review.

Respectfully submitted,



Jeffrey A. Meyers  
Commissioner



THE STATE OF NEW HAMPSHIRE
EDUCATIONAL TUITION AGREEMENT

Agreement dated this 17th day of September, 2019 by and through the Department of Health and Human Services (hereinafter referred to as the "State) and Brianna R. Wall (hereinafter referred to as the "Recipient"). The State and the Recipient do hereby mutually agree as follows:

- 1. The State shall pay to the named institution the sum of \$3,000.00, which monies shall be used for the purpose of enrolling the Recipient in: Applied Statistics, Human Resource Management, Business Systems Analysis and Design, and Principles of Management (course name), which course(s) is being offered by Southern New Hampshire University and which course(s) shall commence on October 28, 2019 and terminate on April 26, 2020.
2. The Recipient shall complete and achieve a passing grade in each course named in paragraph 1.
3. Should the Recipient fail to complete or achieve a passing grade in each course named in paragraph 1, the Recipient shall pay to the State the sum set forth in paragraph 1, provided, however, that if more than one course is named in paragraph 1, the amount which shall be paid to the State shall be calculated on a pro rata basis.
4. Upon the satisfactory completion of the courses named in paragraph 1, the Recipient shall continue in the employ of the State in his/her current position (or in such other position, at equal or greater compensation, to which he/she may be assigned) for a period of six (6) months.
5. The Recipient shall work in any area of the State to which he/she may be assigned, provided that such assignment will not constitute a severe hardship to said Recipient.
6. Should the Recipient breach any of the conditions set forth in paragraphs 4 and 5, the Recipient shall pay to the State a sum equal to all monies previously paid by the State for the Recipient pursuant to the Agreement, provided, however, that the Recipient shall receive a credit for each month in which he/she is employed by the State subsequent to the date upon which the named course(s) are satisfactorily completed, the value of said credit to be calculated on a pro rata basis.
7. The Recipient shall not raise any setoff or counterclaim against the State in any action brought by the State to collect any amount due under this agreement.
8. Should any amount be found to be due the State in any action brought against the Recipient pursuant to this Agreement, the State shall, in addition to said amount, be entitled to an award of costs and a reasonable amount in "attorney" fees.

IN WITNESS WHEREOF the representatives of the State, in his/her official capacity only, and without personal liability, and the Recipient, have hereunto set their hands on the date first above written.

RECIPIENT (signature) [Handwritten Signature] (printed name) Brianna R. Wall

NOTARY State of New Hampshire, County of Merrimack:

On this the 17th day of September, 2019, before me, Trisha Connor the undersigned officer, personally appeared, Brianna R. Wall (recipient) known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes herein contained.

In witness whereof I hereunto set my hand and official seal.

[Handwritten Signature]
Notary Public/Justice of the Peace

TRISHA CONNOR, Justice of the Peace
State of New Hampshire
My Commission Expires December 5, 2023

THE STATE OF NEW HAMPSHIRE

(signature) [Handwritten Signature] (date) 10/26/19
(printed name, title) Jeffrey Meyers, Commissioner