

## OCalhoon MEBA Engineering School 27050 St. Michaels Rd., Easton, MD21601 • Phone: (410) 822-9600 • Fax: (410) 822-7220 Email: applications@mebaschool.org • Web Site: www.mebaschool.org

## **APPLICATION FOR 2016 COURSE ATTENDANCE**

## Unsponsored Individual Training

## REPAYMENT AGREEMENT

I want to take the following course			in order to
qualify me to be employed by one or more	of the following	MEBA companies:	
			and/or
("]			
If I am permitted to take such cours	se(s) I will activ	ely seek work with a N	ew Employer.
I will pay the MEBA Training Fun	d for the cost of	tuition and room and b	oard as determined by
the commercial rates plus the transportation	n expenses for w	hich the MEBA Trainin	ng Fund reimbursed me
if I do not go to work for a New Employer	within (a) 12 m	onths of completing	a course requiring an
annual certification; or (b) 24 months for	or all other cou	rses (and I fail to com	plete at least 60 days
of Covered Employment in the 12 month	th period follow	wing being hired by s	uch Employer).
Notwithstanding the preceding sentence, I	•	2 2	1 2 /
Fund determines that I diligently sought su	_		
work sufficient days of Covered Employme	ent with a New 1	Employer) through no f	ault of my own.
In the event I fail to reimburse the	MEBA Training	Fund under the Agree	ment for the full amount
which I am obligated to pay to the Fund an	_		
costs and fees (including attorneys' fees) in			
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The MEBA Training Fund has mad	ie no representa	tions or promises excep	ot as set forth in this
Agreement.			
I waive trial by jury in any action a	rising under this	s Agreement. I agree th	nat any action arising
under this Agreement shall be brought in a	nd shall be subje	ect to the jurisdiction an	nd venue of the state or
federal courts located in Maryland.			
I have voluntarily signed this Agre	ement in order t	o obtain benefits from t	he MEBA Training Fund
Signature	Date	Witness	
Print Name	Date	Print Name	