

JOB-RELATED TUITION REIMBURSEMENT FORM

Please print in ink and provide all information requested.

SECTION I: APPLICATION FOR COURSE APPROVAL

To request course approval, complete this section.

Course approval must be obtained to be considered for tuition reimbursement.

Return completed form to the Personnel Office for approval.

Name: _____ SSN: _____
Dept: _____ Job Title: _____
Course Number: _____ Course Name: _____
Educational Institution: _____
Brief Description of Course Content:

Total Credits: _____ Date Course Begins: _____
Tuition Fee: \$ _____ Will course Apply Toward Degree? Yes ___ No ___
If so, what degree?
Objective in taking this course (be specific): _____

Employee Signature: _____ Date: _____

Approvals:

Department Manager: _____ Date: _____

Personnel Office: _____ Date: _____

SECTION II: REQUEST FOR REIMBURSEMENT

To request reimbursement, complete this section.

Return completed form to the Personnel Office.

I have completed the course approved on the application and have attached a copy of my receipts and grade record.

Employee Signature: _____ Date: _____

Account Number: _____ Amount: \$ _____

Personnel Office: _____ Date: _____