



Tuition Reimbursement Application

Please review the District's Training and Development policy (P 306), and/or Technical Certification Reimbursement policy (P 307), and submit this completed form and the course description to Human Resources at least two weeks prior to course registration.

Employee – Please complete (please print clearly)

Name	Job Title
Home Address	Supervisor
Work Address	Work #
Date	

Course #	Course Name (Attach a copy of the course description from the school bulletin)	Credit Hours	Tuition Per Credit Hr.

Reason for Taking Course: Explain briefly why you feel the course(s) that you have selected will improve your present job performance and/or prepare you for advancement:

School Attending	Date Course Begins	Date Course Ends	Undergraduate or Graduate Course?
Type of Degree Sought	Total Credits Required for Degree	Credits Accumulated Towards Degree Prior to this Application	Will Credit(s) for this course apply toward degree? (Yes or No)

Are you receiving any other form of financial aid or tuition reimbursement? Yes No

If yes, give amount, type and attach documentation: _____

Estimate of: Tuition Fee: \$ _____

Additional fees: \$ _____

Total Estimate: \$ _____

All the information that I have disclosed above is correct and accurate. My participation in the Tuition Reimbursement Program in no way guarantees a change in or advancement of my position. I hereby apply for participation in the Tuition Reimbursement Program covering the course(s) listed above. I have read and understand the policy, rules, and guidelines of the program and agree to comply with them.

Employee Signature

Date

----- Do not write below this line -----

Approval Recommendations

Approval Recommended: Yes No

Signature of Immediate Supervisor

Name: _____

Signature: _____

Date: _____

Signature of Human Resources Department

Name: _____

Signature: _____

Date: _____

Refund check #: _____ Amount \$ _____