



Tuition Reimbursement Form

Instructions: Once approved by your respective Director and after completing a semester/session, please complete and submit this form along with a copy of the course syllabus, transcript showing your grade(s), and proof of payment for the course to the respective administrative assistant.

Please note, one reimbursement per school year, if funds are still available at the end of the school year you can submit an additional reimbursement between June 1st – 15th.

Name: _____ Job Title: _____

Program: _____ School: _____

Course #	Course Name	# of Units	Total Cost

Course Start Date _____ Course Completion Date _____

Total Tuition (this session) \$ _____

Total Amount Requested \$ _____ (Max. \$550.00 per course)

Employee’s Signature: _____ Date: _____

Program Director’s Signature: _____ Date: _____

Approval to pay (Central Office Use Only)

Executive Director’s Signature: _____ Date: _____

Approved Amount: _____