

Administrative Tuition Reimbursement Form

Name _____ PEID _____

Position _____ Building _____ Date _____

Course:

Course Level Number	College/University	Course Fee
Course Name		
Describe how the course relates to your occupation		
Date Class Begins	Date Class Ends <i>* Reminder: Grade slip due when course ends</i>	
Credits	<input type="checkbox"/> Quarter Credit Hours	<input type="checkbox"/> Semester Credit Hours
Purpose:		Form of payment:
<input type="checkbox"/> Advanced Degree <input type="checkbox"/> New Certification <input type="checkbox"/> Directly related to present assignment		(Mark appropriate selection) <input type="checkbox"/> Please issue a voucher. (one voucher per form) \$ _____ INST _____ <input type="checkbox"/> Will pay personally & submit receipt (must be checked if request if being submitted less than 2 weeks prior to class start date)

Employee's Signature _____

Course meets purposes indicated above _____

Principal's/Administrator's Signature _____

Course Approval _____

Assistant Superintendent

Please send fully completed form to Human Resources. A receipt copy of form and voucher will be sent to you upon approval of the Assistant Superintendent/Director of Human Resources.

Human Resources/Business Office Use Only

School Year	Grade Slip/ Proof of Completion/Date Received	Proof of Payment/Date Received (If applicable)
Budget Number	Amount	Paid To

EAP127 (\$5,250 limit)

EAP132 (without limit)