

# Licensed 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 position		
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
<b>Purpose:</b>		<b>Form of payment:</b>
<input type="checkbox"/> Advanced Degree <input type="checkbox"/> New Certification <input type="checkbox"/> Directly related to present assignment		<u>Classified</u> - Reimbursement will be issued following receipt of Proof of Payment and Passing Grade Slip  <u>Licensed</u> - Reimbursement will be issued at the end of the school year.

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 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
Budget Number	Amount	Paid To

EAP127  
(\$5,250 limit)EAP 132  
(without a limit)