Please Submit to Human Resources

IMPORTANT! Attach required documentation.

REQUEST for REIMBURSEMENT of TUITION for APPROVED COURSES

Name:	School:		Date Submitted:		
Home Address:			Zip:		
* * * * * * * * * * * * I do solemnly declare and cer that the articles have been f received by any person or pe	* * * * * * * * * * CLAIMANT'S SIGNED rtify under the penalties of the l urnished or services rendered rssons within the knowledge of y due and owing; and that the ar	DECLARATION aw that the within bill as stated therein; that this claimant in conne	* * * * * * * is correct in all its part to no bonus has been the ction with this claim	given or	
			Date:		
* * * * * * * * * *	* * * * * * * * *	* * * * * *	* * * * * *	* * * * * *	
APPROVED COURSES:					
Course Title(s):					
College/University:					
Specific Date(s) Taken ¹ :					
Grade(s) Received ² :		Reimbu	rsement Requested	1 ³ : \$	
Attached Documents: Origina	al Invoice(s) ⁴ Copy	of Approved Cours	se or Proposed Pla	n Approval Form(s)	
Copy of Transcript(s) or Reco					
Signature of Principal/Supervisor	Date	Signature of Superin	ntendent/Designee	Date	
	(This section for Board (Office use only.)			
Check #:	Amount of Check: \$	Amount of Check: Date of Check:			
IMPORTANT: All rec	uests for reimbursement mus	t be received by the d	deadline of June 15 ^t	h_	
For classes completed after July 1, 2013:					
(Any requests received after the June 1				sequent fiscal year.)	
 Specific start and completion dates If grade is not available for submiss 		-	•	sequent ver	
 Request for reimbursement may be 	-	· · ·		ooquoni yoan	

4. Original invoice must show cost of tuition, aside from any other fees or expenses.