

**TUITION REIMBURSEMENT FORM
SUPPORT STAFF
COLLEGE COURSE WORK**

For precise wording, please see Section 6.7, on page 31 of the "Agreement between Board of Education, Proviso Township High Schools, District 209, Cook County, Illinois, and Proviso Support Staff' Union, Local 571,".

Name Signature Date

Reimbursement is requested for:

College or University	Name of Course	Course Number	Grade	Tuition	Date Completed

Please attach originals or copies of tuition bills or invoices from your college or university, course preapprovals. Your personal records cannot be accepted. An official (unopened) copy of your transcript will need to be verified prior to reimbursement.

For Office Use Only

	HR SIGNATURE	Reimbursement Amount
PREAPPROVAL FORMS		
SCHOOL TUITION BILL		
OFFICIAL TRANSCRIPTS		
	TOTAL	\$

Date Processed