TUITION REIMBURSEMENT FORM ADMINISTRATORS COLLEGE COURSE WORK

For precise wording, please see your Administrative Contract

Name	Signature			Date	
Reimbursement is requested	for:				
College or University	Name of Course	Course Number	Grade	Tuition	Date Completed
1.					
2.					
3.					
4.					
5.					
Please attach originals or copies of tuiti (unopened) copy of your transcript will	on bills or invoices from your college or university need to be verified prior to reimbursement		ecords cannot b	e accepted. Ar	official
For Office Use Only HR Signature			Reimbursement Amount		
Course Preapproval Forms				1.	
Official Transcripts				2.	
Tuition Bill				3.	
*Addendum – Special Payroll				4.	
		Total		\$	
		·		·	
Approval	Da	ite			