

Tuition Reimbursement Request Form

CCUSD 301

Human Resource Department

Complete and submit to Human Resources upon completion of the approved coursework. An official transcript (bearing registrar's signature and official school seal) must be submitted with this form along with a copy of the receipt for the class. All coursework must receive prior approval in order to be eligible for reimbursement. Approval must be received prior to enrollment in the course. You may submit more than one approved course on the same tuition reimbursement request form:

Employee Name:

Date:

Course Title & Number: Course Dates:

University: Date Completed:

Course Title & Number: Course Dates:

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University: Date Completed:

By signing for tuition reimbursement I acknowledge that I understand the pertinent contractual requirements and procedures.

I hereby request reimbursement of \$ _____ (\$150 per credit hour) for _____ semester hours of approved coursework described above as provided in the Teacher/Board Master Contract and District Board Policy.

Employee Signature: _____ Date: _____

Director of HR Signature: _____ Date: _____

OFFICE USE ONLY

Copy of Transcript ☐ Yes ☐ No Copy of Receipt ☐ Yes ☐ No

Coursework Completed within 6 Months of Coursework Approval / 3 Years of Program Approval ☐ Yes ☐ No

Submitted to Accounts Payable ☐ Yes ☐ No Date: / / Total Reimbursement \$

No more than eight (8) total hours will be reimbursed in any school year-September 1st to August 31st

****Teachers working toward their first approved Master's Degree may be reimbursed up to eight (8) credit hours per semester.***
