**Application for Tuition Assistance**

**Instructions:**

* Refer to our company policy for requirements and further details of the Tuition Assistance program.
* Speak to your manager or HR about your request before you apply.
* Tuition assistance is contingent upon successful completion of the course. Employees must show valid course transcripts at the end of each term.
* This application must be submitted at the time of course registration or within 30 days of the start of classes.
* Reimbursement is contingent upon successful completion of each course and submission of all receipts and paid bills within 30 days.

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Name: | | | |
| Today’s Date: | | | |
| Department and Job Title: | | | |
| Enrollment Status | Technical Training or Certification | Undergraduate Degree | Graduate Degree |
| Degree sought and major, or type of training/certification: | |  |  |
| Name of institution: | |  |  |
| Are you eligible for financial aid? | | Yes | No |
| If yes, are you currently receiving financial aid? | | Yes | No |

**Course Information:**

|  |  |  |
| --- | --- | --- |
| **Course** | | **Credit Hours** |
|  | |  |
|  | |  |
|  | |  |
|  | |  |
|  | Total Credit Hours |  |

**Expenses:**

|  |
| --- |
| Tuition: $ |
| Fees: $ |
| Books and materials: $ |
| **TOTAL**: $ |

Employee Signature:

Date:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Manager Approval  Approved  Denied

Comments:

Manager Signature:

Date: