Hamilton Community Schools

TUITION REIMBURSEMENT REQUEST

ADVANCE APPROVAL – Request must be made before class begins

1. Complete top portion of this form
2. Sign Form
3. Submit for Pre-Approval
4. Once grades are received turn in your grades with this pre-approved form for reimbursement.

Employee Name: _____Building:_____

Employee E-mail Address:_____

College/University: _____

Course Number:_____

Date Course Starts: _____Date Course Ends:_____

Date of Request:_____ Employee Signature: _____

Pre-Approval Signature: _____Date: _____

UPON COMPLETION OF THE CLASS

Please submit the following to your building administrator for reimbursement:

Valid/dated passing grade report – This must show your name along with the college/university name

Valid/dated proof of payment of class and textbooks

Tuition Cost: $_____

Text Cost: $_____

Total Cost* $_____

Credits*   _____

(Office Use Only)
Account #

_____11-1-111-2310-x-x-01545-100000
_____11-1-111-2310-x-x-01548-101000
_____11-1-111-2310-x-x-03403-102000
_____11-1-111-2310-x-x-04975-103000
_____11-1-112-2310-x-x-08890-110000
_____11-1-113-2310-x-x-01547-150000
_____11-1-113-2310-x-x-00427-160000

*Teacher: Not to exceed $150/credit with a maximum of 3 credits per year

_____   _____
Administrative Approval   Date   Controller's Approval   Date