

HELEN M. PLUM MEMORIAL PUBLIC LIBRARY DISTRICT

CHECK REQUEST FOR TUITION REIMBURSEMENT

After class completion - This form must be approved by your supervisor who will then submit it to the Director. Use one form per class.

NAME _____

DATE _____

I am requesting tuition reimbursement according to the Board Policy on Tuition Reimbursement, adopted February 10, 2015.

Class name _____

Class begin (date) _____

Class end (date) _____

Please check one of the following:

___ LTA Undergraduate (maximum of \$100 per hour)

___ Graduate (maximum of \$200 per hour)

___ Other

Indicate # of credits _____

Total reimbursement \$ _____

Three items are required for reimbursement to the student:

1. Proof of payment of tuition. (Attach)
2. Form "Request for Tuition Reimbursement Consideration" for this class or classes. (Attach)
3. Proof of completion of the course with a grade of at least a "B". The library will reimburse for courses which earn a "pass" grade on a "Pass/Fail" basis, if the school does not give letter grades. _____ (Supervisor's Initials)

I agree to remain employed at the Helen M. Plum Memorial Library for twelve months after completing the coursework. If I must leave employment before that time, I authorize payroll deductions to repay the reimbursement and will also repay any remainder due within one year.

Date

Signature

Date
Approved by supervisor

Signature

Date
Approved by Director

Signature