

## EDUCATIONAL ASSISTANCE COURSE APPROVAL AND REIMBURSEMENT FORM

**Instructions:**

1. **Prior to course enrollment, complete the Employee Information and Registration Approval Information sections and obtain management approval.**
2. Send the form to local Human Resources for approval and forwarding to Corporate Human Resources. Refer to the Educational Assistance Policy for approval requirements. Corporate Human Resources will record preapproval and return the form to the employee.
3. Within 30 days of successful completion of the course(s) or as soon as possible following receipt of grade "B" or better, complete the Reimbursement Request section and attach the course receipts and official grade report, obtain management approval, and send the form and attachments to local Human Resources for review, approval, and forwarding to Corporate Human Resources for payment processing. Reimbursement will be made through Payroll in the next available pay cycle. If applicable, taxes will be withheld to the extent required to comply with tax regulations in effect at the time reimbursement is made.

Employee Information				
Employee Name			Employee ID	
Department		Position Title		Business Telephone Number
Registration Approval Information				
Institution		Location		<input type="checkbox"/> Degree Program <input type="checkbox"/> Individual Course(s)
Course Number	Course Description	Term	Start Date (MM/DD/YY)	End Date (MM/DD/YY)
Employee Signature			Date	
Supervisor/Manager Approval—Signature:		Date		
Print Name:				
Local Human Resources Approval—Signature:		Recorded by Corporate Human Resources		Date
Print Name:				
Reimbursement Request				
This is to certify that I have successfully completed the course(s) listed above and in accordance with the Educational Assistance Policy, and request reimbursement for the costs listed below. Any financial aid received from outside sources has been deducted from the amounts.				
Employee Signature _____			Date _____	
Attach supporting receipts	Degree completion date if final reimbursement:		Tuition \$	
Supervisor/Manager Approval—Signature:		Local Human Resources Approval—Signature:		
Date		Date		
Print Name:		Print Name:		