



AFT FACULTY AND PROFESSIONAL STAFF
REQUEST FOR TUITION REIMBURSEMENT

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Contract/Tenure Status: \_\_\_\_\_

Unit: \_\_\_\_\_ Area of Teaching or Work: \_\_\_\_\_

Title(s) of Course(s): \_\_\_\_\_ Credits: \_\_\_\_\_
\_\_\_\_\_ Credits: \_\_\_\_\_

Cost of Tuition per Credit: \$ \_\_\_\_\_ Total Credits: \_\_\_\_\_

Institution: \_\_\_\_\_ Semester Enrolled:
Fiscal Year: \_\_\_\_\_ Summer \_\_\_ Fall \_\_\_ Spring \_\_\_

Are courses job related? [Y] [N] (please check)

If Yes, please explain. (This must be completed in the case of tuition reimbursement for graduate course work to determine if the benefit is taxable)

Supporting reason for request (Include impact on professional development and courses you teach. Additional pages may be added.)

Signature line for Employee, Print Name, Date

Signature line for Unit Head, Print Name, Date

Signature line for Union Representative, Print Name, Date

RECOMMENDATION OF HUMAN RESOURCES
Priority Status -
(1) Those employees who are enrolled in a terminal or graduate degree program for which the employee previously received tuition reimbursement.
(2) Those employees embarking upon an approved terminal or graduate degree program.
(3) All other circumstances
RECOMMENDED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_
Signature line for Director of Human Resources, Date

RECOMMENDATION OF VICE PRESIDENT OR DEAN:

RECOMMENDED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

Signature line for Vice President/Dean, Date

RECOMMENDATION OF PROVOST:

RECOMMENDED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_

Signature line for Provost, Date

ACKNOWLEDGEMENT OF RECEIPT BY VICE PRESIDENT, ADMIN. & FINANCE: \_\_\_\_\_

FOR OFFICE USE ONLY:
Sex \_\_\_\_\_
Ethnicity \_\_\_\_\_