



Tuition Reimbursement Program Request for Reimbursement

Staff Member's Name: _____

Bauer Department: _____

Semester: Fall Spring Summer Academic Year: _____

Courses (ex: ACCT 2331, Financial Accounting)

Tuition cost: _____

Did you receive any other financial aid (scholarships, grants) for this time period?:

Yes No

If so, indicate amount: _____

Enter the amount you are requesting for reimbursement:

_____ (\$1500.00 max)*

If there are related questions, please contact the College Business Administrator at ext. 34612.

*Total payment from all sources cannot exceed the amount of the fee bill.

**Please attach your fee bill and grades.

Procedures/Checklist for Staff Tuition Reimbursement

Fill out C. T. Bauer College Tuition Reimbursement form. Attach

- Grade report from your institution's student records access site
- Copy of your fee bill
- Original receipts for book purchases

Make a copy of all documents for your records and submit the request packet to Melissa Niles in MH 350C. To ensure privacy protection, please put the packet in a sealed envelope.