

**PLEASANT LOCAL SCHOOLS**

**COLLEGE TUITION REIMBURSEMENT REQUEST FORM**

NAME: \_\_\_\_\_ SCHOOL YEAR \_\_\_\_\_

BUILDING \_\_\_\_\_ DATE \_\_\_\_\_

**COLLEGE INFORMATION**

1. College/University \_\_\_\_\_
2. Courses to be Taken \_\_\_\_\_

Building Administrator Approval \_\_\_\_\_

**REIMBURSEMENT INFORMATION**

1. Evidence of course completion with a passing grade  
This may be provided by transcript.
2. Evidence of payment for coursework with a copy of the check and original bill or copy of the original receipt of payment showing the cost per credit hour.

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_

Signature of Superintendent \_\_\_\_\_

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved

Reason: \_\_\_\_\_

Treasurer's Office:

Date Received \_\_\_\_\_ Date Paid: \_\_\_\_\_

Hours on this request: \_\_\_\_\_

Total hours for this individual \_\_\_\_\_

Payment approved: \_\_\_\_\_ Amount per hour \_\_\_\_\_

Total payment this request \_\_\_\_\_