TUITION REIMBURSEMENT FORM

CITY OF DALLAS

SUBMIT TO HUMAN RESOURCES

EMPLOYEE INFORMATION

Vendor Number_____

Last Name	First Name	M.I.	Emp. No.	Dept. Name	Hire Date (Month/Year)

Job Title	Email Address (work or home)	Contact Phone #	Work Address:

COLLEGE/UNIVERSITY INFORMATION

College/University:

Degree Program: ☐ Undergraduate ☐ Graduate

Enrollment Status: ☐ Full-Time ☐ Part-Time

Course Number	Course Title	Credit Hours	Tuition	Begin Date	End Date

Total Tuition: $

Briefly explain how the course(s) improves your <u>current</u> job skills?

I clearly understand that providing an incomplete form, not providing all the required documents and falsification of information will result in me being ineligible for tuition reimbursement and subject to disciplinary action.

_____ _____ _____ _____

Applicant's Signature Date **Human Resources Use Only** **Date**

_____ _____ _____ _____

Applicant's Manager's Signature Date Applicant's Director's Signature Date

IMPORTANT: The tuition reimbursement program is run on a first come, first serve basis. All forms must be submitted PRIOR to beginning courses to ensure that funding is available. ***(If you already have a vendor number, it is not necessary to fill out the employee vendor number form. However, you must write your vendor number at the space provided on the top of this form.***) Upon completion of your course(s), an itemized statement and proof of grade(s) must be forwarded to the Human Resources Department.

----------HUMAN RESOURCES USE ONLY----------

Document Checklist: ___ Official proof of "Satisfactory" grade
___ Proof of Payment
___ Dated Itemized Bill

$_____ AMOUNT APPROVED

_____ REQUEST DENIED

Approved By: _____ Date: _____