School District Tuition Reimbursement Application Form

Policy 5480F

School Year: _____

Employee Information

Employee Name: _____

Position: _____

School/Department: _____

Hire Date: _____

Email: _____

Phone: _____

Reimbursement Request

I am applying for reimbursement for:

☐ BA+24 Completion (Final 3 Credits)

☐ Master's Degree Completion (Final 3 Credits)

College/University: _____

Course(s) Completed: _____

Semester/Term Completed: _____

Date Final Course Was Completed: _____

Date Degree or BA+24 Status Was Earned: _____

Total Tuition Paid for Final Three Credits: $_____

Amount Requested for Reimbursement:

☐ Actual tuition paid (up to $600)

Requested Amount: $_____

Eligibility Certification

Please initial each statement.

_____ I am currently employed by Snake River School District as a contracted certified employee.

_____ I completed the final three college credits required to earn my BA+24 status or Master's degree within the past twelve (12) months.

_____ I successfully completed the required coursework with passing grades.

_____ I understand this reimbursement is limited to actual tuition costs only and does not include books, materials, technology fees, or other course-related expenses.

_____ I understand I may receive reimbursement a maximum of two (2) times during my employment with the District:

- Once for achieving BA+24 status.
- Once for completing my Master's degree.

_____ I understand the maximum reimbursement is $600 for BA+24 and $600 for a Master's degree, not to exceed my actual tuition costs.

_____ I understand reimbursement requests must be submitted to the District Office no later than September 10 of the school year in which reimbursement is requested.

Required Documentation

Please attach the following:

☐ Official transcript showing successful completion of the final three credits.

☐ Tuition receipt or paid invoice showing actual tuition costs.

☐ If applying for Master's reimbursement:

- Copy of Master's degree **or**
- Official transcript showing the Master's degree has been awarded.

☐ If applying for BA+24 reimbursement:

- Official transcript demonstrating completion of at least 24 graduate credits beyond the bachelor's degree.

Employee Certification

I certify that the information provided in this application is true and complete. I understand that providing false information may result in denial of reimbursement or repayment of funds. I further certify that I have read and understand District Policy 5480 regarding the Tuition Reimbursement Program.

Employee Signature: _____

Date: _____

District Office Use Only

Application Received Date: _____

Received By: _____

Eligibility Review

☐ Certified Contract Employee

☐ Completed Within Previous 12 Months

☐ Passing Grades Verified

☐ Documentation Complete

Reimbursement Type

☐ BA+24

☐ Master's Degree

Reimbursement Approved

Actual Tuition Paid: $_____

Approved Reimbursement Amount (Maximum $600): $_____

☐ Approved

☐ Denied

Reason for Denial (if applicable):

_____

_____

HR Reviewer: _____

Signature: _____

Date: _____

_____

Payroll Use Only

Payroll Processing Date: _____

Payroll Month Issued: _____

Amount Paid: $_____

Processed By: _____

Signature: _____