



EDUCATIONAL ASSISTANCE REQUEST

(Reference Personnel Rule 15.2.L)

PART I. Advance Approval (to be completed in advance of taking course)

Name: _____ Dept.: _____ Job Title: _____

This request for advance approval for Educational Assistance is submitted in accordance with Personnel Rule 15.2.L. I have read this Rule and agree to comply with it.

Name of Course: _____ School or Institution: _____

Date Course to Begin: _____ Date Course to End: _____

Description of Course (you may attach a copy of printed course description from school): _____

Tuition cost: \$ _____

Registration cost: \$ _____

Total request: \$ _____

Employee Signature

Date Requested

Department Director

Approved/Disapproved

Human Resources Director

Approved/Disapproved

City Manager or City Auditor and Clerk, for their respective employees

Approved/Disapproved

PART II. Request for Reimbursement (to be completed after successful completion of course)

Attached is a transcript or other official record indicating successful completion of the course described above with final grade of _____. I am requesting reimbursement as follows:

Course Final Grade	Percent Reimbursable
A	100%
B	90%
C	80%
D or Below	0%

Reviewed By (Department Director)

Date

Authorized Reimbursement (Director of Human Resources)

Date