

Warren County Schools

**Educational Tuition Assistance Request Form (Reimbursement)**

**Instructions:** (please make a copy of all submitted documents for your records)

- 1. Complete form and submit it to Ms. Casey Richardson-HR/Licensure Specialist
- 2. Applicant must receive approval for Educational Tuition Assistance
- 3. Complete WCS Educational Tuition Reimbursement Assistance Agreement

Date of Request: \_\_\_\_\_ School/Agency: \_\_\_\_\_

Applicant: \_\_\_\_\_

Course Number: \_\_\_\_\_ Course Title \_\_\_\_\_

*If you have a plan of study, please indicate which objective you anticipate this course counting towards on your plan of study.*

Dates of Course: \_\_\_\_\_ Number of Credits: \_\_\_\_\_

Brief Description of course relevancy to current position: \_\_\_\_\_

\_\_\_\_\_

*For Central Office Use*

**Approval**

Granted \_\_\_\_\_ Semester credit hours \_\_\_\_\_

Denied \_\_\_\_\_ Reason \_\_\_\_\_

**Required documentation to receive reimbursement for course being taken:**

- a. \_\_\_\_\_ Grade Sheet
- b. \_\_\_\_\_ Plan of Study (if applicable)
- c. \_\_\_\_\_ Course Description
- d. \_\_\_\_\_ Itemized bill and receipt of payment

**NOTE:** Please attach any information received from institution or agency that is relevant to course. **Reimbursements are a maximum of \$500.00 per request.** You may only submit one request per semester, and a maximum of two requests per year. Please note that tuition reimbursement assistance is based upon the availability of funds.

Amount to be reimbursed: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Dr. Keedra Whitaker  
Chief Human Resources Officer