

APPLICATION FOR TUITION REIMBURSEMENT

SECTION ONE - EMPLOYEE SECTION:

Complete this section and sign where indicated. Forward the completed form to your Department Director for approval. Submit this application, to the Human Resources Benefit Division for further consideration. Incomplete forms will be returned.

Name: _____ Department: _____ Work Phone: _____
Job Title: _____ SS # _____ Employee ID _____
Title of Course(s): _____

Name of Educational Institution _____
Date Course Begins: _____ Course(s): \$ _____ Book(s): \$ _____ Course Fees: \$ _____
Did you apply for the Earned Income Tax Credit in the previous year? Yes No (if Yes, include a copy of your tax returns.)

REASON COURSE IS ELIGIBLE FOR TUITION REIMBURSEMENT:

- ☐ To improve job skills. ☐ Seeking a degree and the course is required.
☐ Suggested by Supervisor. ☐ Non-degree or not-for-credit course.
☐ To prepare for future assignment with Metro Government.
☐ Other - EXPLAIN: _____

ARE YOU ELIGIBLE FOR EDUCATIONAL ASSISTANCE FROM ANY OTHER SOURCE?

☐ Yes ☐ No If yes, state all sources of funding that will contribute to the cost of this course and the amounts of the funding. Your reimbursement will be adjusted accordingly.

All the information on this application is true and factual to the best of my knowledge.

EMPLOYEE SIGNATURE: _____ DATE: _____

SECTION TWO - DEPARTMENT DIRECTOR:

I agree _____ disagree _____ with the employee's evaluation of how this course of study is related to a current or future job assignment. If disagree, state why:

DEPARTMENT DIRECTOR SIGNATURE _____ DATE _____

SECTION THREE - HUMAN RESOURCES DEPARTMENT:

- ☐ Approved for \$ _____, upon completing the course of _____ hours with a minimum grade of C or Pass.
☐ Rejected: _____ Not Job-related _____ Incomplete Application _____ Agency Responsibility

DIRECTOR OF HUMAN RESOURCES _____ DATE _____

HUMAN RESOURCES DEPARTMENT USE:

Course(s) \$ _____ Book(s) \$ _____ Course Fees \$ _____
Amount of Reimbursement \$ _____ Total Amount YTD \$ _____
Grade _____ Date Reimbursement Request Received _____ by _____

The Louisville/Jefferson County Metro Government declares and reaffirms a policy of equal opportunity, and of non-discrimination in the provision of all services to the Public and its employees.