

TUITION ASSISTANCE APPROVAL FORM

SUBMIT TO HUMAN RESOURCES

Academic Year: _____

EMPLOYEE INFORMATION

Approved By:

Last Name		First Name M.I		M.I.	Emp. No.	Dept. Name			H	lire Date
									(,
Job Title		I	Email Address (work or ho		e)	Contact Phone # Worl		Work Add	ress:	
COLLEGI College/Ur	E/UNIVERSITY INFO	ORMATIO	ON							
Degree Pro	ogram: 🗌 Undergraduat	ie 🗌 Gra	duate	Certifi	cate:					
Enrollment	Status: 🗌 Full-Time	🗌 Part-	Time							
Course Number		e	Credit Hours		Tuition Begin Dat		Date	ate End Date		
Total Tuition: \$ Briefly explain how the course(s) relates to your current position or probable future assignment.										
	Briefly explain how the	e course(s) relates to you	r currei	nt position	or probab	le future a	assignme	ent.	
I clearly understand that providing an incomplete form, not providing all the required documents or falsification of										
information may result in me being ineligible for tuition reimbursement and subject to disciplinary action.										
										_
	Applicant's Signature		Date		Human Resources Use Only				Date	_
A	Applicant's Manager's Signature				Applicant's Director's Signature			en e	Date	_
	RTANT: All forms m									
•	course(s), an itemize	ed stater	ment and proof	of gra	de(s) mu	st be forw	arded to	the Hu	man	
Reso	urces Department.									
]	HUMAN RESOU	RCES U	JSE ONLY	(
Do	ocument Checklist:									
	Official Proof of "Satisfact	ory" grade:		\$			T APPRO	VED		
	Proof of Payment:		Date			DECILE		П		
	D	ate					ST DENIE	0		
	Dated Itemized Bill:									
	D	ate				DENIAL R	EASON			

Cuyahoga County Deptartment of Human Resources, 2079 East Ninth Street, Cleveland, OH, 44115. Telephone: 216-443-3539

Date: