

## CHECKLIST FOR TUITION REIMBURSEMENT

STAFF NAME \_\_\_\_\_

COURSE NAME AND NUMBER \_\_\_\_\_

CREDIT HOURS \_\_\_\_\_ TOTAL COST \_\_\_\_\_

LPDC PRIOR APPROVAL GIVEN? (CHOOSE ONE): \_\_\_\_ Yes \_\_\_\_ No

LPDC REPRESENTATIVE:

Signature \_\_\_\_\_ Date \_\_\_\_\_

TENTATIVE APPROVAL GIVEN? (CHOOSE ONE) \_\_\_\_\_ YES \_\_\_\_\_ NO

\_\_\_\_ Request for tuition reimbursement form

\_\_\_\_ Course description (Must accompany request form for tentative approval)

\_\_\_\_ Grade indicating successful completion of course (Can be grade report or unofficial transcript for tuition reimbursement)

\_\_\_\_ Billing information for course

\_\_\_\_ Payment information for course

FINAL APPROVAL GIVEN? (CHOOSE ONE): \_\_\_\_\_ YES \_\_\_\_\_ NO

DATE OF FINAL APPROVAL: \_\_\_\_\_

Comments: \_\_\_\_\_

