Waynedale Local Schools Tuition Reimbursement Request Form (Revised 10/1/25)

A. Initial Request - Fill out the following information before the class starts. Then give it to your building rep. or Association Vice President. Name: ______ Building: _____ Phone Number:______ SS #_____ Name of Class You will be taking: Sponsoring Institution/College Name:_____ Number of hours: _____ Cost per hour:_____ Total Amount Requested: (Max is \$600.00/class) Date Course Starts: _____ Semester Taken: _____ I agree that the above information is correct and that I am in compliance with all the requirements for reimbursement as outlined by the Association and contained in the contract. I hereby submit my official request for reimbursement. **B.** Association Acknowledgement Application for Reimbursement received on:

Amount Approved: Vice President's Signature:____ Copy made and original sent back to applicant **C. Final Request -** To be completed by the applicant after the completion of the course and sent to the VP along with Proof of Payment and Official grade/Transcript I agree I have fulfilled the requirements for reimbursement as outlined by the Association and in the Contract. I hereby submit my final request for reimbursement. Applicant's Signature:______Date:_____ D. Association Acknowledgement: Final Amount Approved: VP Signature:

Date Sent to Treasurer: