

Request for Tuition Reimbursement for DPS Teachers and Administrators

Revised September 2015

PLEASE PRINT ALL INFORMATION.

Name: _____ DPS ID No.: _____

School/Location: _____

Current Teaching Assignment (subject and/or grade): _____

Type of Degree Held (Check one.): BACHELOR'S MASTER'S DOCTORATE

Type of License (Check one.): Collegiate Professional Technical Professional Provisional

Postgraduate Professional Pupil Personnel Sp Education Conditional

Endorsement Area(s) Listed on License: _____

Expiration Date of License: June 30, _____

COURSE FOR WHICH TUITION REIMBURSEMENT IS SOUGHT:

Course Title: _____

Course Number: _____ No. of Semester Hours: _____

College/University: _____

Cost per Credit Hour: \$ _____ TOTAL COST: \$ _____

**Tuition reimbursement applies only for tuition – does not include technology fees, book fees, or other college/university or on-line fees.*

For tuition reimbursement, attach a copy of your canceled check and/or receipt from the offering institution along with a copy of your grade report. *When requesting to use this course for licensure purposes (renewal, adding an endorsement, etc.) one must submit an official transcript to the Department of Human Resources.*

LICENSE HOLDER'S SIGNATURE

DATE SIGNED

▶ Tuition reimbursement checks are usually sent to the school. If you want your check mailed to your home, please print your complete address: _____

PLEASE FORWARD THIS FORM TO THE DEPARTMENT OF HUMAN RESOURCES.

FOR THE DEPARTMENT OF HUMAN RESOURCES USE ONLY

Amount of tuition reimbursement funds available during this current licensure cycle: \$ _____

TUITION REIMBURSEMENT: APPROVED NOT APPROVED

Signature: Juliet C. Jennings, Ed.D., Chief Human Resources Officer

Date Signed