

CALTECH Tuition Reimbursement Plan
REQUEST FOR REIMBURSEMENT OF TUITION – FORM 15-15B

Academic Program Approval Form **15-15A** must be approved before instruction begins.
 After registering for class(es), complete and submit this form, **15-15B**,
 along with a copy of the course syllabus, to the office of Tuition Reimbursement.

Name _____ Email _____

Job Title _____ Ext _____ Mail Code _____

Dept./Div. _____ School _____

Session Starting Date _____ Ending date _____

<i>Course No.</i>	<i>Course Title</i>	<i>Units</i>	<i>Tuition</i>

Total Tuition (this session) \$ _____

Other Reimbursable Fees \$ _____ (Attach explanation)

Total Amount Requested \$ _____

The information above is correct, and I further certify that I will not receive duplicate or comparable fees for this tuition from any grant, scholarship, or VA benefit.

Employee _____

This employee remains eligible for participation in the Tuition Reimbursement Program.

Supervisor _____ Date _____

Within 30 days of course completion, submit the following to Tuition Reimbursement:

- o Official course grade (2.0 or C, or better)
- o Itemized receipt of fees paid, listing course name, units, and tuition per unit

At that time, this request (15-15B) will be processed for payment.

Approval to pay (HR Use Only)

_____ Amount to pay \$ _____
 Tuition Reimbursement Coordinator Date