



# Brigham Young University–Hawaii

## REQUEST FOR TUITION REIMBURSEMENT (GRADUATE DEGREE)

1. Complete this form after successfully completing coursework and receiving grade(s).
2. Print and attach the following:
  - a. Copy of invoice /receipt showing tuition expense per credit.
  - b. Copy of grades for completed coursework to Human Resources.
3. Obtain signature of supervisor.
4. Submit to Human Resources.

### EMPLOYEE INFORMATION

|                      |                    |
|----------------------|--------------------|
| <b>Employee Name</b> | <b>Employee ID</b> |
| <b>Job Category</b>  | <b>Department</b>  |

### ENROLLMENT INFORMATION

|                             |                      |
|-----------------------------|----------------------|
| <b>Graduate Institution</b> | <b>Semester</b>      |
| <b>Year</b>                 | <b>Total Credits</b> |

### COURSE INFORMATION

|                            |                        |
|----------------------------|------------------------|
| <b>Class / Credits</b>     | <b>Amount / Credit</b> |
| <b>Total Amount ( \$ )</b> |                        |

|                            |                        |
|----------------------------|------------------------|
| <b>Class / Credits</b>     | <b>Amount / Credit</b> |
| <b>Total Amount ( \$ )</b> |                        |

|                            |                        |
|----------------------------|------------------------|
| <b>Class / Credits</b>     | <b>Amount / Credit</b> |
| <b>Total Amount ( \$ )</b> |                        |

|                        |                           |
|------------------------|---------------------------|
| <b>Supervisor Name</b> | <b>Department Account</b> |
| <b>Signature</b>       | <b>Date</b>               |

#### For HR Use Only

\_\_\_\_ Verified employee's successful completion of the course(s) taken.

Reimbursement calculation: \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_ / 2 = \_\_\_\_\_

\_\_\_\_ Approved \_\_\_\_ Not Approved

PC Signature \_\_\_\_\_ Printed Name \_\_\_\_\_

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