

Active Employee Application for Tuition Assistance/Reimbursement

Please print
Must Be Filled Out Completely

Name: _____

Badge #: _____

Address: _____

Number, Street, Apt #

e-mail address: _____

City, State, Zip Code

Department: _____

Position Title: _____

Phone Number: _____

School/ Institution to attend:

Name: _____

Address: _____

Web link: _____

What best describes your educational goal:

Certificate

Bachelor Degree

Continuing Education

Associate Degree

Graduate Degree

Other _____

Semester begins on: _____

Semester ends on: _____

Course no. / Course name

Books*

Fees*

Tuition

Cost

*Do not include non-mandated books, equipment or other non-tuition costs.

Total Costs _____

By submitting this form I agree that:

- ◆ I am not receiving duplicate tuition assistance from any other sources.
- ◆ When I finish my studies I will send proof of completion to the Learning Center if applicable.
- ◆ I authorize the Institution listed above to release any information requested by UPI Career Development regarding tuition paid, benefits or scholarship aid received, or completion of courses.

In addition to this application you must submit all supporting documentation to:

Jessica Carpio
900 Loveridge Road
Pittsburg, CA 94565
MS 17

Supporting Documentation for Tuition Reimbursement includes the following: Complete address or web-link to the institution/school; Copy of course description from the institution/school catalog; Copy of proposed tuition costs along with compulsory fees (lab fees/material fees).

Signature

Date

Approved By

Date

Total Approved