



KC Transportation, Inc.  
Request for Tuition Reimbursement  
(Part I)

Employee Name \_\_\_\_\_

I am requesting advance approval for tuition reimbursement for the following class(es):

Course Name (1): \_\_\_\_\_

Course Name (2): \_\_\_\_\_

Course Name (3): \_\_\_\_\_

Course Name (4): \_\_\_\_\_

Institution: \_\_\_\_\_

Start Date: \_\_\_\_\_

Management Response to Request  
(Part II)

The signatures below indicate that the course(s) requested is sufficiently job related, and that the request for the reimbursement has been approved.

\_\_\_\_\_  
Manager/Supervisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Human Resources Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
President

\_\_\_\_\_  
Date

Reimbursement  
(Part III)

To Be Submitted by the Employee Upon Completion of the Course(s) and Attached to the Request:

- ✓ Invoice or bill showing *actual* paid amount of tuition.
- ✓ Grades earned for each course requested.

Reimbursement will be calculated as follows:

	A	B	C
First Highest Grade	100%	75%	50%
Second Highest Grade	75%	50%	25%
Third Highest Grade	50%	25%	-----
Fourth Highest Grade	25%	-----	-----

Note: Reimbursement will not exceed \$500.00 per course taken.

I have completed the course(s) listed on the front side of this document, and acknowledge receipt of the reimbursement amount shown below.

Amount to be Reimbursed: \$ \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Human Resource Representative

\_\_\_\_\_  
Date

Date Reimbursement Took Place \_\_\_\_\_

\_\_\_\_\_  
Controller Signature

\_\_\_\_\_  
Date