MIAMIBEACH

Tuition Assistance Program Application Form

General Information

Date: _____

Name: _____ Date Employed: _____ City ID #: _____

Department: _____ Classification _____

Phone: _____ Course Schedule Dates: _____

Name of Educational Institution: _____

Educational Objectives ☐ Non Degree ☐ Undergraduate Degree ☐ Graduate Degree

Academic Degree ☐ Non Degree ☐ Associate's ☐ Bachelor's ☐ Master's

Major (Area of Concentration): _____

DO NOT WRITE IN SHADED AREAS

COURSE(S) REQUESTED	TOTAL CREDITS	ELIGIBLE Y/N	DATE GRADES RECEIVED	GRADE	AMOUNT	INITIAL FOR APPROVAL
1.						
2.						

State how coursework meets the objectives of the Tuition Assistance Program:

Part I: Coursework, Degree Review and Approval

Department verification: ☐ Approved ☐ Denied, reason: _____

Documents provided: ☐ Tuition Assistance Application
☐ Class Schedule
☐ Catalog Description(s) for course(s) listed above

_____ _____
Department Director's Signature   **Date**

Part II: Reimbursement

Attach the following supporting documentation and submit to the Human Resources Department no later than 30 days after grades have been posted:

☐ Supporting documentation provided with Part I
☐ Course Registration Statement
☐ Receipt of Payment in full
☐ Grade(s) received for course(s) listed above

Employee Signature
By signed below, I am affirming that I have read and agreed to comply with the requirements set forth in the Administrative Procedure No. HR.20.1 - Employee Tuition Assistance Program.

	Date