TUITION REIMBURSEMENT FORM

CITY OF DALLAS

EMPLOYEE INFORMATION

Last Name	First Name	M.I.	Emp. No.	Dept. Name		Hire Date (Month/Year)
Job Title			Email Address (work or home)		Contact Phone #	Work Address:

COLLEGE/UNIVERSITY INFORMATION

College/University:_____

Enrollment Status: ☐ Full Time ☐ Part Time

Degree Program: ☐ Undergraduate ☐ Graduate

Course Number	Course Title	Credit Hours	Tuition	Begin Date	End Date
Total Tuition					

Briefly explain how the course(s) improves your <u>current</u> job skills?

I clearly understand that providing an incomplete form, not providing all the required documents and falsification of information will result in me being ineligible for tuition reimbursement and subject to disciplinary action.

_____   _____
Applicant's Signature   Date

IMPORTANT: The tuition reimbursement program is run on a first come, first serve basis. This form must be completed and submitted via Workday no later than the first official/scheduled day of class for the course(s) to ensure funding is available. Upon completion of your course(s), proof of grade(s) must be forwarded to your manager so they can complete a One-Time Payment request for you in Workday within 30 days of the date you receive your grade(s).