APPLICATION FOR TUITION REIMBURSEMENT

Employee’s First Name_________________ Employee ID # ____________________________

Employee’s Last Name_______________ SDP Email Address ____________________________

Contact Number ____________________

**Job Classification. Check One:**

- __ Non-Teaching Assistant __ Recertifying Teacher (teachers who do not hold a Level 2 certification)
- __ Secretary __ Paraprofessional __ School Operations Officer __ Non Degreed Professional/Technical
- __ Other: ______________________________

**Eligibility:** Tuition reimbursement is provided for paraprofessionals, non-teaching assistants, secretaries, non-degreed professional/technical members assigned to the bargaining unit and teachers who need to be re-certified according to the Agreement between The School District of Philadelphia and the Philadelphia Federation of Teachers. Reimbursement is not given for tuition covered by grants received from another program.

**List completed courses:**

<table>
<thead>
<tr>
<th>Course Title and Number</th>
<th>Name of College/University</th>
<th>Semester Spring</th>
<th>Semester Summer</th>
<th>Semester Fall</th>
<th>Total Credits</th>
<th>Cost</th>
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Amount of Tuition Reimbursement Requested: $ ____________________________

*Approved candidates will receive up to a maximum of $600*

I hereby acknowledge that the information listed above is accurate.

Employee’s Signature: ____________________________ Date: ____________________________