WOODLAND HILLS SCHOOL DISTRICT
REQUEST FOR TUITION REIMBURSEMENT

Employees will be reimbursed for tuition costs actually incurred and paid by them for graduate credits beyond Bachelor + 24 with a "B" grade for higher or "P" where applicable

Please submit this *pink* form to the Personnel Office and retain a copy for your records.
Your paid invoice and a transcript or grade report must be attached.

Name _____ School _____

Institution Attended _____

Dates of Attendance _____

Course No.	Title of Course	Number of Credits
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

Total Number of Graduate Credits Received (please complete) .....

Actual Tuition Paid (Exclude fees, etc.) (please complete) .....

I certify that I presently hold a Bachelor's degree plus 24 credits. (Please indicate the highest degree you presently hold.) _____
(Please complete)

In addition, I certify that the tuition for the above course was not paid directly or indirectly by a scholarship or through a state or federal assistance program.

_____ _____
Your Signature Date

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Reimbursement in the amount of $_____ is approved. **ASN# 1781**

_____ _____
Walter M. Calinger, Ph.D., Superintendent Date

If you terminate your employment within 1 year : 100% repayment to WHSD
If you terminate your employment within 2 years: 75% repayment to WHSD
If you terminate your employment within 3 years: 50% repayment to WHSD
If you terminate your employment within 4 years: 25% repayment to WHSD
(See Page 42 of your Collective Bargaining Agreement between WHSD and WHEA)