

# Tuition Reimbursement Application Form

FOR GROUP REGISTRANTS OF NON-MOODY'S EMPLOYERS

*Disclaimer: This form is designed to help you obtain financial approvals from your employer. Please note, you are still required to follow additional protocols as indicated by your employer.*

## Group Registrants

Employee must complete all areas and obtain an approval signature of the appropriate administrator.

Name of Institution: \_\_\_\_\_

### TO BE COMPLETED AND APPROVED PRIOR TO COURSE START DATE

Employee Name	Course Name	Start/End Date	Course Cost	Cost of Travel/Other	Total Cost
		-			
		-			
		-			
		-			
		-			
		-			
		-			
		-			
		-			
		-			
<b>TOTAL COST FOR TUITION/TRAVEL/OTHER (in</b>					<b>):</b>

**REQUESTOR**

**APPROVER:**

Signature:

Signature:

Date:

Date:

Only an individual who has been granted proper financial approval limits to cover the amount of reimbursement is authorized to sign this form. Upon approval, please forward the original application with the corresponding receipts and send them to your appropriate department for processing.