



NON-NOTRE DAME TUITION REIMBURSEMENT

Name: [] Date: []
NDID: 9 [] Campus Phone []
Department: [] Position: []

UNDERGRADUATE OR GRADUATE COURSE:

Accredited educational institution [] Degree Program (e.g.: BA, MA, MBA) []
Anticipated Degree/Certification Graduation Date [] Hrs Completed Toward Degree/Cert. []

Course Title []
Explain course relevancy to current position []

Check One: [] Fall Semester [] Spring Semester [] Summer Semester
Tuition Rate per Credit Hour [] Number of Credit Hours for Course [] Total (tuition only) []
[] Undergraduate [] Graduate

SKILLS TRAINING OR CERTIFICATION

Class Certification Title []
Organization/Institution []
Date of Class(es) []
Fee/Instruction Cost []

APPROVAL SECTION

Employee's Signature: [] Current Date: []

Academic study must not infringe upon services expected of the staff and faculty. Approval of the supervisor is required.

SUPERVISOR APPROVAL

Supervisor's Printed Name: [] Title: []
Supervisor's Signature: [] Current Date: []