

**Tuition Reimbursement Request Form (to be submitted for each semester of request)**

Employee Name

Employee ID Number

Faculty  Staff  Full-Time  Part-Time

Tuition Reimbursement Requested for (check one) Fall  Spring  Summer

Name of Educational Institution

Course Name and Number

Requested Reimbursement amount (up to \$1,000 per semester) \$

Approved Reimbursement amount \$

**Justification:**

In the field below, please provide details on how the request above specifically aligns with the employee IDP. Please also provide a short business case for the request being made including the reason for this pursuit and the value of the educational benefit to the employee, the school, and the college.

**Reviewed and Approved by:**

Supervisor Signature

Typed or Printed Name of Supervisor

Date

Department Head Signature

Typed or Printed Name of Dept Head

Date

HR Director Signature

Typed or Printed Name of HR Director

Date

Asst Dean of Finance Signature

Typed or Printed Name of Asst Dean Finance

Date

**Disclaimer:**

Every effort will be made to provide annual funding and keep its commitment for tuition reimbursement. However, budget and funding changes and pressures may not allow for full funding of the tuition reimbursement, even if it has been previously approved. Tuition reimbursement, related to the pursuit of courses or degrees outside of Virginia Tech, should be fully contemplated by an employee and evaluated with or without Virginia Tech support since budgets/support cannot be guaranteed from year to year.