

Tuition Assistance Course Completion Notification

Date _____

Employee Name _____ Employee # _____ Division _____ Charge # _____

Course Title _____ Dates(s) _____ Cost _____

Book Reimbursement Section

Name of Textbook(s)	Price	Note: Receipt for books must be attached.

Attach copy of grades.

Attach copy of Tuition Assistance Request that was approved for this course.

Employee Signature and Date

APPROVED: _____
BCF Supervisor Signature and Date

APPROVED: _____
BCF Group/Division Director Signature

APPROVED: _____
HR Director Signature and Date