

TUITION REIMBURSEMENT REQUEST APPROVAL



Date: / /	Date submitted to P/R: /
Name:	
School:	
Is this an approved degree program? Yes No	
Are the below listed courses undergraduate? Yes No Degree:	
Are the below listed courses graduate? Yes No Degree:	

COURSE(S)

Name	Number	Department	Final Grade	Tuition/Fees/Books	To Be Refunded

Are you receiving or will you receive for the above class(es) a grant, scholarship, or other financial assistance that doesn't require reimbursement by you? Yes No

If yes; source of fund amount: _____

	Course Approved/Signature	Date	Refund Approved/Signature	Date
Supervisor/Manager				
HR (VP or Director, Benefits)				

WHO MAY APPLY

Full time Non-Union employees (30+ hrs) with 6 months of continues employment. Prior approval required.

What May Be Approved	Who Must Approve	What Will Be Reimbursed	Amount to be Reimbursed
<ul style="list-style-type: none"> ■ Any education at an accredited institution that improves or develops the capabilities of the employee for the mutual benefit of the employee and the company. ■ Grade of C or better for undergraduate study, Grade of B or better for graduate study. ■ No special arrangements unless approved In writing in advance by the VP of HR. 	<ul style="list-style-type: none"> ■ Supervisor/Manager to sign off on approval of courses ■ Department Head ■ HR (VP or Director, Benefits) 	<ul style="list-style-type: none"> ■ Tuition ■ Books ■ Lab fees ■ Registration fees 	<ul style="list-style-type: none"> ■ 100% for Grade of A ■ 90% for Grade of B ■ 80% for Grade of C ■ No additional reimbursement ■ If a choice of grades or Pass/Fail, employee must choose grades. If only Pass/Fail, reimbursement is 80%. ■ \$5,250 statutory annual limit for reimbursement

PROCEDURE

1. Submit course schedule for prior approval each semester/term to your Supervisor/Manager.
2. Upon completion of the course(s), submit the approval form, a copy of the transcript displaying a minimum grade of "C" for undergraduate study, and a minimum grade of "B" for graduate study.
3. Forward to the Human Resources Department for approval and reimbursement. Copies of the Transcript and Receipts must be attached and form must be signed by your Supervisor and Department Head.
4. I understand that if I voluntarily terminate my employment with an Azuria Water Solutions Company or I am terminated for cause, I must reimburse the company pro-rata for any tuition reimbursement paid to me in the last 12 months. I authorize Aegion to automatically deduct this pro-rata amount from my final paycheck.

Employee Signature _____ Date Signed _____