

Educational Assistance Request

Complete this request before you start the course. Send it to the Benefits Office at Human.Resources.Benefits@dartmouth.edu or HB 6042. You will receive an approval email for your records. After you complete the course, send proof of payment and proof of your grade for reimbursement.

1. About you

Last name		First name		Initial	
Hinman Box		Phone		Dartmouth ID#	
Hours worked per week or FTE %		Date of hire			
Employee type	☒ Salaried ☐ Hourly				
Current position and department					

2. About the course

College or university you will attend	
Course type (check all that apply)	☐ Undergraduate: BA/BS (including AA/AS) ☐ Graduate: Masters or PhD (excluding certifications or seminars)
Is the course job related?	☒ Yes ☐ No
Part of a degree program?	☒ Yes ☐ No
If part of a degree program, anticipated graduation date	
Course start date	
Course end date	

3. Costs you will pay

Course title and number	Tuition	Registration fee	Books
Total			

4. Work schedule

- ☐ My enrollment or participation will not interfere with my regularly scheduled work hours or job responsibilities. Supervisor approval is not required.
- ☐ My enrollment or participation will require a temporary adjustment in my regular work schedule, as described below. Supervisor approval is required.

Details of the work schedule adjustment

5. Confirmation and approval

By typing my name, I confirm that the information on this form is correct.

Applicant's name (typed as your signature)

Date

Supervisor's approval (only if your work schedule will change)

Date

The supervisor can sign in Adobe Fill & Sign, or on a printed copy.

Reimbursement is for expenses you paid yourself. Courses taken at Dartmouth are covered by the Tuition Grant Program, not this program.