

**DARTMOUTH COLLEGE - SEIU Tuition Reimbursement Program Application**

**Instructions: PRIOR** to starting the course, complete and submit this application. If asking for an adjustment to your work schedule, have your Supervisor/Department Head sign in the **Work Schedule** Section below. Return the completed and signed application to the Office of Human Resources either by email ([Human.Resources@Dartmouth.edu](mailto:Human.Resources@Dartmouth.edu)) or by mail to Hinman Box 6042. Once your application has been approved, an approval email will be sent to you for your records. After completing the course, send proofs of payment and successful course completion for reimbursement.

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<b>Last Name</b>	<b>First Name</b>	<b>Initial</b>	<b>Hinman Box</b>	<b>Phone Number</b>
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Hours worked per week \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Employee Type:    Full Time                      Nine Month                      Dartmouth ID#: \_\_\_\_\_

Current Position / Department \_\_\_\_\_

Program you will be attending: \_\_\_\_\_

**Course information:**

Course Start Date: \_\_\_\_\_ Course End Date: \_\_\_\_\_

Course Title	Tuition	Registration Fee
1. _____	\$ _____	\$ _____
2. _____	\$ _____	\$ _____
3. _____	\$ _____	\$ _____
	<b>TOTAL</b>	\$ _____

\_\_\_\_\_

<b>Applicant's Signature</b>	<b>Date</b>
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**Work Schedule**

My enrollment/ participation in this course will not interfere with my regularly scheduled work hours or job responsibilities (supervisor approval NOT required).

My enrollment/participation in this course will require a temporary adjustment in my regular work schedule as follows (supervisor approval required):

- Details of work schedule adjustment requested: \_\_\_\_\_
- Supervisor's approval: \_\_\_\_\_