

EDUCATION FUND EXPENSE CLAIM

"Proof of successful completion shall be official transcripts as provided by the university from which the course was taken. All claims not submitted within twelve (12) months of completion of the course shall not be paid." *Tuition Reimbursement, ATA-HPSD Collective Agreement*

Teacher Information	
Name:	
School:	

Course Information	
Title:	Completion Date:
Title:	Completion Date:
Title:	Completion Date:

Teacher Signature:	Date:
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Tuition Reimbursement
<i>For more information, please refer to the most recent ATA-HPSD Collective Agreement which can be accessed on the Alberta Teachers' Association website.</i>

Email/scan this form, along with course transcripts, within 12 months of successful course completion,
to pd@hpsd.ca at LSC.

Late expense claims will not be approved.

Office Use Only			
BUDGET CODES		____ @ Half Course (3.0 credit hours)	\$
		____ @ Full Course (6.0 credit hours)	\$
		Total Reimbursement to Teacher	\$

Approval Signature	
HPSD Representative:	Date: