



**Request for Tuition Reimbursement for DPS Teachers and Administrators**

Revised January 14, 2025

**PLEASE PRINT ALL INFORMATION.**

Name: \_\_\_\_\_ DPS ID No.: \_\_\_\_\_

School/Location: \_\_\_\_\_

Current Teaching Assignment (subject and/or grade): \_\_\_\_\_

Type of Degree Held (Check one.):  BACHELOR'S  MASTER'S  DOCTORATE

Type of License (Check one.):  Collegiate Professional  Technical Professional  Provisional  
 Postgraduate Professional  Pupil Personnel  Special Education Conditional

Endorsement Area(s) Listed on License: \_\_\_\_\_  
\_\_\_\_\_

Expiration Date of License: June 30, \_\_\_\_\_

**COURSE FOR WHICH TUITION REIMBURSEMENT IS SOUGHT:**

Course Title: \_\_\_\_\_

Course Number: \_\_\_\_\_ No. of Semester Hours: \_\_\_\_\_

College/University: \_\_\_\_\_

Cost per Credit Hour: \$ \_\_\_\_\_ TOTAL COST: \$ \_\_\_\_\_

**\*Tuition reimbursement applies only for tuition – does not include technology fees, book fees, or other college/university or on-line fees.**

For tuition reimbursement, attach a copy of your canceled check and/or receipt from the offering institution along with a copy of your grade report. *When requesting to use this course for licensure purposes (renewal, adding an endorsement, etc.) one must submit an official transcript to the Department of Human Resources.*

\_\_\_\_\_  
LICENSE HOLDER'S SIGNATURE

\_\_\_\_\_  
DATE SIGNED

▶ Tuition reimbursement checks are usually sent to the school. If you want your check mailed to your home, please print your complete address: \_\_\_\_\_

**PLEASE FORWARD THIS FORM TO THE DEPARTMENT OF HUMAN RESOURCES.**

**FOR THE DEPARTMENT OF HUMAN RESOURCES USE ONLY.**

Amount of tuition reimbursement funds available during this current licensure cycle: \$ \_\_\_\_\_

TUITION REIMBURSEMENT:  APPROVED  NOT APPROVED

Signature: Angela Wimberly, Chief Human Resources Officer

\_\_\_\_\_  
Date