



Tuition Reimbursement Request Form

Name:	Date:	If a Degree Program, Check one: <input type="checkbox"/> GED OR HS Diploma <input type="checkbox"/> Associate Degree <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Graduate Degree				
Job Title:	Department:					
Manager:	Phone/Email:					
School:	Semester/Qtr/Year:					
Course Title		Number	Program Dates (From/To)	Days	Hours	Credits
Expenses:	Tuition	Books	Misc. (Specify)			Total

I have reviewed and understand the terms of the Fanatics Tuition Reimbursement Policy. I also understand that I will be reimbursed for tuition expenses upon submitting proof of completion of courses, including grades and expense documents.

Employee Signature Date

APPROVAL

Chief People Officer/ Head of Benefits Date