

**SIMPSON COLLEGE
EMPLOYER APPROVAL FORM FOR TUITION REIMBURSEMENT**

Employee/Student: _____ Student ID No: _____

<u>Course Title</u>	<u>Credits</u>	<u>Tuition Amt.</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Employer: _____ Phone: _____

Employer Address: _____

Approval Person approves the above class(es) for the above student at the employer reimbursement guidelines listed below:

Approval Person Name: _____ Title: _____

Approval Person Signature: _____

EMPLOYER REIMBURSEMENT GUIDELINES:

Grade attainment stipulations: A B C D F None

Other stipulations: _____

Employer percentage of tuition to be paid: _____

Reimbursement paid to: _____ Employee/Student
 _____ Simpson College

Payment will be made: _____ Prior to class
 _____ Upon completion of class
 _____ Upon receipt of grade report
 _____ Other _____

RETURN TO:

Simpson College Attn: Business Office 701 N. C St., Hillman Hall Indianola, IA 50125 Phone: 515-961-1269 FAX: 515-961-1498 Attn: Shelly	Simpson College West Des Moines Campus 3737 Westown Pkwy, Ste 2E West Des Moines, IA 50266 Phone: 515-223-8842 FAX: 515-961-1887	Simpson College Ankeny Campus 2501 Tones Dr, Suite 800 Ankeny, IA 50021 Phone: 515-965-9355 FAX: 515-965-9358
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This form needs to be attached to the Simpson College Part-Time Student Employment Reimbursement Loan Promissory Note that the student needs to sign before classes begin. This form needs to be signed by the employer for each term of classes. If you have any questions, please feel free to call the Business Office at 515-961-1269 or the Division of Adult Learning at 515-961-1614.

(Rev. 8/2003)