SIMPSON COLLEGE
EMPLOYER APPROVAL FORM FOR TUITION REIMBURSEMENT

Note: This form needs to be completed each term.

Employee/Student: _____ Student ID No: _____

Course Title	Credits	Tuition Amt.

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: Denise

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 SE Tones Dr, Ste 800
Ankeny, IA 50021

Phone: 515-965-9355
FAX: 515-965-9358

This form needs to be attached to the Simpson College Adult Learning 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. 4/07)