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## Form 217-B: Final Request for Tuition Assistance and Employment Continuation Agreement

Name:	Employee ID #:		
Department: Job Title:			
Office phone:	Cell/home phone:		
Total reimbursement requested initially approved on	Form 217-A:	<u></u>	
Total reimbursement being requested: (Reimbursement may not exceed eligible tuition and m	nandatory attendance	fees, appr	oved in Form 217-A.
A copy of my Chancellor-approved Form 217-A is attached. A copy of my transcript is attached, providing proof that I have satisfactorily completed the courses approved on Form 217-A. A copy of any and all other necessary receipts are attached to support my request for reimbursement of tuition.		Yes	No
		Yes	No
		Yes	No
<u>For Applicant:</u> By my signature below, I attest, up this form are authentic copies and that I have suc with Program requirements found in Policy #217. Employee/Applicant's signature	cessfully completed		
<u>For Supervisor:</u> I approve this request, certifying matters we agreed to related to the employee's at	g that the applicant	abided by	the scheduling
Supervisor's signature			
Dat ************************************	-	*******	*****
For Human Resources Director or Assistant Dire	<u>ctor:</u>		
I attest that the employee had approval on Form attest that this applicant has met the program rec what has been submitted.	217-A for the classes		
Human Resources Director or Assistant Director		Date	

Once HRD or HRAD approves this form for reimbursement, the HRD or HRAD shall cause a BRCC "Request to Pay" document to be submitted to accounting so that the employee can be reimbursed. Both the approved forms 217-A and 217-B shall be attached to the "Request to Pay" form as proof. A copy of the completed "Request to Pay" form shall be filed in the employee/applicant's human resources file.

(This form shall be placed in the employee/applicant's human resources file.)