

AUBURN SCHOOL DISTRICT NO. 408

915 4th NE, Auburn WA 98002
253-931-4935 Accounts Payable

TUITION REIMBURSEMENT WARRANT

Fund: Tuition Reimbursement	School/Dept.:
Date:	Account Code:

Claimant Name and Address	Amount	Explanation (i.e. student loan, conference, classes, credits)

TOTAL:		<p>CERTIFICATION:</p> <p>I hereby certify under penalty of perjury that this is a true and correct claim as described and that the claim is just, due and an unpaid obligation of Auburn School District No. 408.</p>
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<p>ALLOWABLE PAYMENT REQUESTS: College credit classes, continuing education units, clock hours, and registration and/or instructor fees for workshops and conferences, existing educational loans, professional dues, and/or certification/licensure purposes.</p>	<p>CLAIMANT (Sign below) Date</p>
<p>ITEMS REQUIRED FOR - Proof of payment (receipt showing payment, copy of cancelled check, credit card receipt, etc.) - Proof of completion (certificate of completion, clock hour form, statement of attendance from provider, etc.)</p>	<p>Executive Director of HR Date</p>
	<p>Assistant Superintendent Date</p>

Note: Payments are made twice a month at the regularly scheduled Board meeting	
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