



Bluffview Montessori

Employee (non-Montessori) Tuition Reimbursement Application Form

The terms of this program are outlined in Policy ###.

Name:	
Position:	
Signature:	Date Signed:

COURSES AND CREDITS (may attach doc from institution as well)				
Date	University or College	Title	Semester Credits	Total Credits

Please complete and submit this form with your signature to the Head of School for approval. Attach your official university transcript. This form with accompanying documents must be received no less than 2 weeks prior to the coursework starting.

To be completed by the Head of School:

☐ **Application Approved**

☐ **Application denied due to:**

Head of School

Date