**Employee’s Instructions:**

After successful completion of classes, submit enclosed Duke University Employee Tuition Assistance Reimbursement Request Form to your school’s Student Accounting Office for completion (*this form is invalid if prior course approval was not provided and/or if you are not enrolled in direct deposit*). Please allow sufficient time for the school to complete the Form.

1. Within 60 days of course end date, submit the following documents:

   - completed Duke University Employee Tuition Assistance Reimbursement Request Form;
   - and official proof of successful completion of course(s) (a “C” grade or better, “Pass” or “Satisfactory”)

Please note: Reimbursement will not be processed if all required documentation is not received by the Benefits Office within 60 days of course completion. Reimbursement will generally occur within four (4) weeks of receipt of all required documents described above.

Send all documents to the Benefits Office at:

**Email:** employeetuition@duke.edu  **Fax #:** 919-681-8774  
Duke University Benefits  
Employee Tuition Assistance Program  
705 Broad Street, Box 90502  
Durham, NC 27705

**Determination of Award Amounts:**

All employees to which Duke University tuition reimbursement payments are directed will be required to refund to Duke University any credit balance (up to the amount reimbursed by Duke) that occurs after the reimbursed amount and all other scholarships, grants, or other forms of assistance (excluding loans and payments by the student) are applied.

**Scholarships:**

- If the scholarship is **not designated** towards tuition and **not greater than fees**, then the scholarship has no impact on the reimbursed amount.

- If the scholarship is **not designated** towards tuition and **is greater than non-tuition costs** (fees), then the amount over the non-tuition costs will be deducted from the reimbursed amount.

- If the scholarship is **designated towards tuition**, then the scholarship will be applied towards tuition and will reduce the amount for which the employee is eligible for reimbursement.

**What the program does not cover:**

- Transportation costs, late fees, parking costs, graduation fees, examination fees, textbooks, supplies, registration fees, tuition surcharges, student fees, and other similar costs are not eligible for reimbursement.

- Schools that are not accredited by the Southern Association of Colleges and Schools and schools without a physical presence in North Carolina are not eligible for reimbursement.

- Certification programs that do not provide academic credit and correspondence courses are not eligible for tuition reimbursement.

- Tuition costs associated with thesis or dissertation course work or masters papers are not eligible for reimbursement.

- Courses which are solely research are not covered by this program, even if the course provides credit hours. (This includes individual research under the direction of program faculty.)
**Duke University Employee Tuition Assistance Program**

**Reimbursement Request Form**

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**TO BE COMPLETED BY STUDENT**

Name ___________________________ Duke ID ___________________________

I authorize the release of information included on this form.

I acknowledge that official proof of successful completion of course(s) (a “C” grade or better, “Pass” or “Satisfactory”) is required to be submitted with a completed copy of this form in order for reimbursement to be received.

Student Signature ___________________________ Date ___________________________

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**TO BE COMPLETED BY SCHOOL’S STUDENT ACCOUNTS OFFICE**

(after successful completion of courses):

**Institution’s Instructions:**

a. After student’s successful completion of coursework, please complete section 1-6 of this form. **Please return the completed form to the student.** The student will verify that the form is complete and will return it to the Duke University Benefits Office for processing.

b. The Duke University Employee Tuition Assistance Reimbursement Program is applicable **only to tuition expenses**. Please exclude any fees or other charges from reported tuition amounts. Please only include actual amounts.

c. Please include the School seal or stamp on the form to certify authenticity of information provided.

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**SECTION 1: STUDENT INFORMATION**

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Student ID</th>
</tr>
</thead>
</table>

---

**SECTION 2: ENROLLMENT INFORMATION**

Student is registered for:  

Select One:  

- [ ] Semester  
- [ ] Quarter  
Year ______________

Select One:  

- [ ] Spring  
- [X] Summer  
- [ ] Fall  
- [ ] Winter

---

**SECTION 3: COURSE INFORMATION (Please include all courses)**

<table>
<thead>
<tr>
<th>Course Name</th>
<th># of Credit Hrs/Course</th>
<th>Tuition Only/Course(Excluding Fees)</th>
</tr>
</thead>
</table>

Total Tuition(Excluding Fees) $ __________

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**SECTION 4: PAYMENT INFORMATION**

Amount paid by Student this term $ __________

Date(s) paid by Student __________

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**SECTION 5: ASSISTANCE INFORMATION**

Scholarships, grants, or other forms of assistance being received this term (excluding loans and payments by the student): Please include actual amounts.

Designated for Tuition $ __________  
Undesignated for Tuition* $ __________  
(i.e. Books, Fees, etc.)

*If student is receiving undesignated assistance, please specify the following standard charges: Fees $ __________

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**SECTION 6: SCHOOL CERTIFICATION**

I certify the above information is correct.

Certifier’s Signature __________

Printed Name and Title of Certifier __________

E-mail Address __________

Telephone Number __________ Date __________  

Institution stamp/seal: __________

School Name __________

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Please return completed form to the student.