



TUITION REIMBURSEMENT REQUEST

ASSOCIATE NAME	PERSONNEL (SAP) NUMBER	DATE SUBMITTED

INSTRUCTIONS: Complete and submit this form to the HR Services Department (contact information at the bottom of the page) immediately following satisfactory completion of the course(s). Approval is required prior to beginning a program for reimbursement. You must attach detailed, legible copies of your paid tuition fee(s), registration fee(s), book receipt(s) and grade(s). This form and all required documentation must be submitted within **30 days** of receiving the final course grade(s). Any expenses received later than this deadline will not be approved.

REQUIRED DOCUMENTS:

- STATEMENT OF PROGRAM/ TUITION COST
- TUITION PAYMENT RECEIPT WITH FORM OF PAYMENT
- BOOK RECEIPT(S)
- FINAL COURSE GRADE

EDUCATIONAL INSTITUTION (NOTE: EDUCATIONAL INSTITUTION MUST BE ACCREDITED)	NAME OF DEGREE OR DIPLOMA	UNDERGRADUATE	GRADUATE
NAME OF CERTIFICATE PROGRAM/OTHER	QUARTER / SEMESTER	COURSE START DATE	COURSE END DATE

COURSE NUMBER	COURSE TITLE	REGISTRATION COST	TUITION COST	BOOK COST	COST TOTAL

OTHER SOURCES OF FINANCIAL AID	AMOUNT

I UNDERSTAND THAT IN THE EVENT THAT I VOLUNTARILY TERMINATE MY EMPLOYMENT WITH THE COMPANY, I AGREE TO REPAY ANY REIMBURSEMENTS RECEIVED UNDER THIS PROGRAM WITHIN THE LAST TWELVE MONTHS OF MY EMPLOYMENT WITH THE COMPANY. I CERTIFY THAT I HAVE DISCLOSED ALL OTHER FINANCIAL AID AND/OR SCHOLARSHIPS THAT I HAVE RECEIVED OR WILL BE RECEIVING FOR THE COURSES LISTED ABOVE. ELIGIBILITY FOR REIMBURSEMENT SHALL BE GOVERNED BY THE TERMS OF THE COCA-COLA BEVERAGES FLORIDA EDUCATIONAL ASSISTANCE PROGRAM.

ASSOCIATE SIGNATURE/DATE

Send completed forms to:

E-mail Address: hrrservices@cocacolaflorida.com