



Tuition Reimbursement Form

(Continuing Applications Only)

For consideration by the Grant Committee, please fill out this form and submit with your receipts.

Name: _____

Age: _____

Years Employed at PNB: _____

Program/class(es) you are taking: _____

Name of school or institution: _____

Time Frame: _____ to _____

Total Dollar Amount of Request: \$ _____

Tuition: \$ _____

Other costs: \$ _____

Would you like to meet with the Committee? Yes _____ No _____

Additional information:

If your overall career goals have significantly changed since your initial application to the Grant Committee, please describe in the space below.

