



# UAW-Ford Employee Tuition Plan Book Reimbursement Request Form



**{A receipt must be attached as proof of payment.}**

**Must be submitted no later than 90 days from start date of term-Active Employees only**

**Section I**

**Applicant Information** (please print with **BLUE** ink or type)

Employee Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_ Telephone #: ( ) \_\_\_\_\_  
(Number/Street) (City/State) (Zip)

Plant/Location: \_\_\_\_\_ Local Union #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**Are you in the Apprenticeship program?**  YES  NO **If YES, you must attach verification of enrollment.**

**Section II**

**School/Course Information for Requested Book Reimbursement**

Term Beginning Date: \_\_\_\_\_ Term Ending Date: \_\_\_\_\_

School/Provider (Full Name): \_\_\_\_\_

School Telephone Number: \_\_\_\_\_

School Address: \_\_\_\_\_  
(Number/Street) (City/State) (Zip Code)

Please list course number(s) and title(s):

Course Number (PSY101)	Course Name(s) (Example: Intro to Psychology)	Course Number (PSY101)	Course Name(s) (Example: Intro to Psychology)
_____	_____	_____	_____
_____	_____	_____	_____

**Section III**

**Book Information for Requested Course(s) Above**

Name of Bookstore: \_\_\_\_\_

Book Name: _____	Book Cost
Book Name: _____	_____
Book Name: _____	_____

\* Cannot exceed \$200.00 per calendar year. For college credit classes only. **Amount of Book Reimbursement Requested\* =** \_\_\_\_\_

**Section IV**

**Conditions**

As an eligible UAW-represented Ford Motor Company employee, I am requesting a book reimbursement under the UAW-Ford Employee Tuition Plan. I understand that (1) a book reimbursement will be subject to conditions contained in the Plan; (2) I am responsible for the payment of all non-approved costs and/or fees; (3) I agree to provide whatever information may be required for the administration of the UAW-Ford Employee Tuition Plan and that continuance in the Plan is subject to meeting its provisions. (I further authorize any educational institution that I may attend to release to the UAW-Ford National Programs Center any requested information pertinent to this Plan regarding my status in said institution, including the release of a transcript or other information as outlined in the Plan.)

**UNSIGNED APPLICATIONS WILL BE RETURNED, WHICH DELAYS PROCESSING**

**[DO NOT SUBMIT PRIOR TO THE SCHOOL'S OFFICIAL DROP/ADD DATE]**

**Submitting a Book Reimbursement prior to the drop/add date will result in a delay of processing this application.**

\_\_\_\_\_  
Employee's Signature (**BLUE** Ink) \_\_\_\_\_  
Date

For Center Use

A  D  R  
 E  P

--	--	--	--

PAY TO EMPLOYEE

**When completed, mail to: UAW-Ford National Programs Center, 151 W. Jefferson Avenue, P.O. Box 33009, Detroit, MI 48232-5009**



# Instructions for Completing the Book Reimbursement Request Form



Read these instructions carefully before you fill out the application form.

## General

- ◆ Print with **BLUE** ink or type all requested information
- ◆ Fill in all of the information requested
- ◆ To be eligible for a book reimbursement, the book must be for a course paid for through the Employee Tuition Plans (ETAP) Program [\$200 is counted toward the \$5,000 ETAP limit]
- ◆ If you need assistance, contact call 1-800-367-3829
- ◆ A receipt must be attached
- ◆ **BE SURE TO SIGN AND DATE THE APPLICATION**

## Section I

### APPLICANT INFORMATION

- ◆ Any change in name or address must be submitted to Ford personnel
- ◆ Social Security Number is essential
- ◆ Be sure to include your area code with your telephone number

## Section II

### SCHOOL/COURSE INFORMATION

- ◆ Be sure to spell out the entire school name (do not use acronyms such as: MCCC)
- ◆ Term beginning and ending dates must be entered and only one term should be applied for per application
- ◆ Enter the course number and title of the course you are taking, which generated this book cost

## Section III

### BOOK INFORMATION

- ◆ Fill in the name of the bookstore or the origin used to purchase your book
- ◆ List each book purchased for your college credit class only
- ◆ Enter the amount requested

## Section IV

### CONDITIONS

- ◆ Read the application carefully then **SIGN** and **DATE** the application in **BLUE** ink. Unsigned or incomplete applications will be returned, which delays processing. Mail the completed application to:

**UAW-Ford National Programs Center  
Tuition Assistance Department  
151 W. Jefferson  
P. O. Box 33009  
Detroit, Michigan 48232-5009**