

**SIMPSON MANUFACTURING CO., INC.
EDUCATION REIMBURSEMENT APPLICATION**

Fill this out before the beginning of each semester and submit to your branch HR representative.

Employee Name: _____ Branch Location: _____

Job Title: _____ Hire Date: _____

Manager's Name: _____ Employee Phone #: _____

Please answer all questions. Make note of any schedule changes or information your manager should know about.

This request is for: _____ Undergraduate _____ Graduate

Is this course going towards completing a degree requirement? If yes, what degree?

What college/university: _____

Courses to be taken:

Comments: _____

Administration Use Only

Has the employee been with the company for a minimum of 6 months? _____

Will the employee need to make any work schedule adjustments? If yes, has the necessary changes/arrangements been made and discussed between manager and employee? _____

_____ Approved _____ Not Approved

Manager's Signature

Date

Reason for Denial: _____

Branch Manager's Signature

Date