

**DUAL ENROLLMENT/ IDA EARLY MIDDLE COLLEGE**  
**TEXTBOOK REIMBURSEMENT REQUEST**

***\*\*Complete a different reimbursement request for each class\*\****

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Home Telephone Number: \_\_\_\_\_

Cellular Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

College Course Title: \_\_\_\_\_ Section Number: \_\_\_\_\_

Title of Textbook(s): \_\_\_\_\_

\_\_\_\_\_

And/Or

Title of Access Code if applicable: \_\_\_\_\_

Circle one: Purchase or Rental

Reimbursement Amount Requested (pretaxable amount): \_\_\_\_\_

\*Taxes are not eligible for reimbursement.

\*Please attach receipt to this request.

\*Textbook and this form may be submitted to the **librarian** after completion of college course.

\*Checks will not be issued until after the textbook is returned to the library at the end of the course.

\*Reimbursement amounts will be calculated by taking the amount of money received from State Aid and subtracting tuition and fee costs for each course.

\_\_\_\_\_

For Internal Use Only:

\_\_\_\_\_

Librarian Signature

\_\_\_\_\_

Business Office Signature

Reimbursement Amount Approved: \_\_\_\_\_

