



**Consolidated Nuclear Security Pantex Request for  
Educational Assistance Reimbursement**  
(Reference E-PROC-0009)

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**Instructions:**

Part 1: All employee-students and student pre-hires complete this section.

Part 2: All employee-students and student pre-hires Acknowledge the type and dollar amount of any educational assistance received other than CNS Educational Assistance (EA). Sign and date the acknowledgement.

Submit completed PX-80 (pg 2) with approved PX-266 (pages 1-2), official receipts and official grade reports to EA Auditor. Incomplete forms/receipts/reports will not be processed and will be returned to the employee for completion.

Requests for Reimbursement (with required supporting documentation) must be submitted within 60 days of course completion, or employment start date for Student Pre-hires, to be considered. In addition, an approved PX-266 must be submitted prior to reimbursement.

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**Definitions:**

Official receipts must identify the student by name or ID and include a complete breakdown of fees, tuition, monetary assistance, discounts, and evidence of payment. Book receipts must show cost and payment.

Official grade reports must be issued by the Educational Institution and show name or ID and specific identification of courses and grades received.



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**PART 1:**

Name: \_\_\_\_\_ Badge: \_\_\_\_\_ Mail Stop: \_\_\_\_\_

Current Job Title: \_\_\_\_\_ Educational Institution: \_\_\_\_\_

Degree Sought: \_\_\_\_\_ Current Semester: \_\_\_\_\_

I hereby apply for reimbursement for the following approved course(s):

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

Total Tuition \$ \_\_\_\_\_

Total Fees \$ \_\_\_\_\_

Required Books \_\_\_\_\_ \$ \_\_\_\_\_

(Cost and Course Number \_\_\_\_\_ \$ \_\_\_\_\_

for which book was \_\_\_\_\_ \$ \_\_\_\_\_

purchased) \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**Grand Total** \$ \_\_\_\_\_

**If requesting reimbursement for books, a copy of course syllabus must be attached.**

**PART 2:**

**EMPLOYEE-STUDENT CERTIFICATION**

I understand that any educational assistance, other than CNS assistance, (specifically for tuition, fees, and books) which I am receiving must be acknowledged at the time of this application for reimbursement. Omissions will be treated as falsification of records.

Other than CNS Educational Assistance, I am receiving the total amount of (Enter "0.00" if none) \$ \_\_\_\_\_:

Check all applicable source(s) of assistance:

- Federal or State Assistance
- Scholarship
- Grants
- College discount

Date \_\_\_\_\_ Signature \_\_\_\_\_