



## Continuing Education Units (CEU) Cost Reimbursement Request Form For Healthcare Workers

Reimbursements may be paid up to \$250 per year per member. Payments are determined by the executive board and are only available as funds permit. Applicants must file for reimbursement within 90 days of certificate receipt and be members of good standing with this union. Payments will count toward the calendar year in which the certification was received. If reimbursement is made, checks must be picked up at the union hall. Please allow 4-6 weeks for processing.

Please submit completed form along with a copy of your receipt and a certificate of successful completion of CEU to the Healthcare Representative at [lmccarty@local341.com](mailto:lmccarty@local341.com) or by Fax (907) 341-0342.

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Member Name	Employer	Title or Job Description
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Name of CEU Course or Session

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Date of Course or Session	Registration Fee(s)/Costs
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Member Mailing Address	City, State	Zip Code
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Member Phone Number

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Signature

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Date