## T.E.A.C.H. Early Childhood® WEST VIRGINIA

## Tuition/Book Reimbursement Claim Form

Recipient Information			
Social Security #:Á			
Recipient Namel (A	Curity #:Á		
Addressk <u>A</u>	ACenter Name:A		
City, State, Zipka	ıty, State, ∠ıpı <del>x</del> <u> </u>		
Current Program/Option: AAS/	BA		
Term Attended FALL ÇÔ@&\Á}}^D	SPRING	SUMMER	YEAR
Tuition and Fees			
Tuition/Fees amount: \$	Tuition paid by: (c@& one)	Æstudent	ÁACenter ÁAT.E.A.C.H.
Course Titles:			Credit Hours:
			-
	sed or receipts are not av		
Total books amount: \$	Books paid by: ÆStuden ÆStuden ÆÔ@&Æ;}^D	-	
Book Titles:			Price (without tax)

**Return with receipts to:** T.E.A.C.H. Early Childhood® WEST VIRGINIA

River Valley Child Development Services

611 Seventh Avenue, Suite 322

Huntington, WV 25701 Fax: 304-529-2535