



ELDP
Employer Reimbursement Form

This form is provided for students who will be reimbursing the cost of tuition for course(s) taken at Clarkson University through the Lockheed-Martin ELDP Program. Please complete this form to defer payment of your tuition in order to obtain reimbursement from your employer. This request must be completed and returned to the SAS (Student Administrative Services) Office and may be denied if any previous semester charges remain outstanding. Completion of this form is required only once. Any changes to the information must be reported to SAS Office to ensure timely and accurate billing.

The student will be responsible for any unpaid balance should the employer not make payment.

Student Information

Name _____ Student ID Number _____
Home Address _____
Home Phone _____ Business Phone _____
Home E-mail _____ Business E-mail _____

Employer Information

Employer: ELDP Supervisor
Lockheed Martin MS2
PO Box 4840, EP5, K1, MD69B
Syracuse, NY 13221-4840

Current ELDP Coordinator: Christopher Barr, christopher.barr@lmco.com (through July 2010)

[x] Payment Expected upon completion of the term

[x] The student will be reimbursed following their successful completion of credits taken. A copy of the student grade report will be sent to the ELDP Coordinator before the student is reimbursed.

Authorization

By signing below I am authorizing the SAS Office to release educational records pertaining to my student account and academic information to the ELDP coordinator at Lockheed Martin, Syracuse Office. This authorization remains in effect while I am enrolled at Clarkson University. I understand that I may terminate this authorization at any time by notifying the SAS Office in writing.

Student's signature _____

Date _____

Return completed form to SAS
Clarkson University • PO Box 5615 • Potsdam, NY 13699-5615
315-268-6451 • Fax 315-268-6452