



KEES Qualified Workforce Training Program Expense Reimbursement Request

KY Educational Excellence Scholarship (KEES) eligible students in an approved qualified workforce training (QWT) program can submit this form to request reimbursement of training expenses. Approved expenses include items such as tuition, books, required tools, uniforms, safety equipment, licenses, and travel. The total reimbursed each year cannot exceed the total KEES earned while in high school.

Note - A KEES Qualified Workforce Training Program Pathway Selection Form, available at www.kheaa.com, must be on file with KHEAA before reimbursement is requested. You may contact KHEAA at (800) 928-8926 ext. 67396 to check your status.

To request reimbursement, complete this form and return it, along with dated and itemized receipt of the items purchased, to the following address:

KHEAA
Attn: KEES Qualified Workforce Training
P.O. Box 798
Frankfort, KY 40602-0798

Requests for the period ranging from July 2023 to May 2024 must be postmarked on or before June 15, 2024. Additional request forms may be completed and submitted as needed.

(Please print legibly)

QWT Student Name _____ Last Four of SSN _____
QWT Student Address _____ City _____ State ____ Zip _____
QWT Student Email _____ Phone (_____) _____
QWT Approved Training Institution Name _____

Item Purchased	Store/Place Where Purchased	Amount (excluding taxes)
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Travel Amount Requested (No proof of purchase required. Up to \$500 per year) \$ _____

TOTAL AMOUNT REQUESTED \$ _____

Certification and Signature (required)

Student: *I certify I purchased the items listed above to satisfy the requirements of my qualified workforce training program.*

QWT Student Signature _____ Date _____

QWT Instructor: *I certify the purchased items listed above are required for participation in and completion of the qualified workforce training program in which this student is enrolled.*

QWT Instructor's Name (print) _____

QWT Instructor's Signature _____ Date _____