



TRUCKEE TAHOE AIRPORT

PRE-APPROVAL REQUEST FOR FLIGHT RATING REIMBURSEMENT

Submit before each specific rating.

1. Complete form and obtain all approval signatures.
2. Send completed form to your Direct Supervisor/Manager.
3. If rating is not a requirement of your position, you will be limited to \$3,000 in reimbursements a year.

Name:	Employee ID#:
Address:	Phone:
City:	State: Zip:

Department:
Job Title: Director:
Employment Status: Full Time Part Time Date of Hire:

Type of Flight Rating:
Estimated cost of Rating:
Location:
Is this rating a requirement of your position: Yes No
Details of expected outcomes/usage as it pertains to your current position:

Previous flight ratings received:
Completion Dates:
School(s):

Signature of Applicant: _____ Date: _____

Signature of Director: _____ Date: _____

Signature of General Manager: _____ Date: _____

Upon completion of a flight rating, District employees will be subject to a 24 month service agreement. If a District employee voluntarily terminates employment before completing the service agreement, the employee must repay a pro-rata of the amount reimbursed. Repayment may be deducted from the employee's final paycheck.