WOMEN OF TODAY'S MANUFACTURING

Member Education Reimbursement Application

Fill-out form, sign, and mail with proof of course completion and paid receipt to:

Women of Today's Manufacturing

PO Box 7688

Rockford, IL 61126-7688

For Office Use Only	
Amt Paid:	$
Check #	
Date Sent:	
Authorized by:	

First Name *Last Name* *Date*

Current Mailing Address: _____

_____

_____

Title of course, seminar, workshop, etc. *Date of Attendance*

Please answer the following questions:

Describe the material covered and how it relates to the manufacturing industry.

_____

_____

_____

Why did you decide to take this course, seminar, workshop, etc.?

_____

_____

How would you rate the experience?

1 2 3 4 5 6 7 8 9 10

Poor *Average* *Outstanding*

Would you recommend it to someone else? Yes No

Proof of educational opportunity must accompany this application. Request for reimbursement must take place within 30 days of the end of the educational opportunity. A check will be issued in the name of the member. This check will be forwarded via mail to the recipient of the funds. WOTM funds are not meant to reimburse companies or educational opportunities that are funded by any other entity except the member themselves. This program may be terminated at any time by the Board of Directors, and in any event, is in effect only to the extent funds are available.