EDUCATION PROVIDER CLAIM FOR REIMBURSEMENT FROM **DIVORCING PARENT EDUCATION AND MEDIATION FUND (T.C.A. § 36-6-413)** FOR REDUCED FEE PARENTING EDUCATION

INSTRUCTIONS: Type and submit in duplicate to the Administrative Office of the Courts, grants@tncourts.gov, Divorcing Parent Education and Mediation Fund, 511 Union Street, Suite 600, Nashville, TN 37219.

STATE OF TENNESSEE

COUNTY OF: ____

_____ COURT: _____ PART: _____

Cases for which a claim is being made:

Docket No.	Name of Parent	Date of Referral	Date of Service	Service Fee	Material Fee
Totals:				\$	\$

NOTE: Attach copies of the original Orders to No Fee or Reduced Fee Education to this form. Give details of the parenting education services and material provided in the area provided on the back of this form. Email to grants@tncourts.gov

I certify that the foregoing represents an accurate, complete statement of time in connection with parent education in the above action or proceedings.

Signature of Education Provider

Date

Provider:	
Address:	
City:	State:Zip:

Enter FULL Name Address Email and Phone Number

Phone: (___) ____ - ___ Email:_____

TO BE COMPLETED BY THE ADMINISTRATIVE OFFICE OF THE COURTS

Total authorized payment

Date of Service	Name of Parent	Services Provided	Materials Provided