-	Education Form	
Name of Employee:	Institution:	
Credit Hours Earned:	Date Completed:	
Please provide a brief description of the c	Course Details ourse taken in the space below	
CREDIT/REIMBURS	SEMENT REQUEST (CHECK ALL THAT APPLY)	
Requesting Credit for Movement on Neg	otiated Salary Schedule: From Lane to	the Lane

Note: This form must be accompanied by updated transcripts indicating that the course has been completed and credit has been recorded by the credit granting institution, <u>documentation of payment</u>, <u>AND a listing of continuing education credits by year for fulfillment of the requested change</u>. This form is found on the next page. Unofficial copies of transcripts are acceptable. Registration forms or grade confirmation sheets are not acceptable documentation for recording credit or granting reimbursement.

Requesting Credit Reimbursement for Approved Graduate Program: Credits at \$200/credit=\$

Requesting Reimbursement from My Continuing Education Account: Amount Requested \$

before course is taken, and be accompanied by a signed travel expense reimbursement voucher)

Requesting Reimbursement for Expenses (must be Title IIA eligible, have pre-approval from superintendent

.00

.00

Requesting Credit to Meet District Continuing Education Requirements

Employee Signature	Date						
FOR OFFICE USE ONLY							
Approval of Credit for Moven	nent on Negotiated Salary Schedule: From	Lane to theLane					
Approval of Credit to Meet D	istrict Continuing Education Requirements						
Approval of Reimbursement	from Continuing Education Account						
Approval of Reimbursement	for Expenses						
Approval of Credit Reimburse	ement for Approved Graduate Program: <u></u>	.00					
Administrator Signature	Date						

## **Rugby Public School District #5 Continuing Education Form Credit Documentation Form**

Year Attended	Course Name	University	# of Credits	Cost
		00.0.0.0		