Application for Teacher Tuition Reimbursement

Course Title & Number:	
Course Title & Nulliber.	
Name of Accredited College or Unive	ersity:
Date of First Class (Preapproval by Su	uperintendent is Required):
Date Class is Scheduled to End:	
Indicate how course relates to your a	area(s) of responsibility or your IPDP (attach additional pages if necessary):
reimbursement must be approved by Course work must be gradue Course work must be from a Course work must be directly Provide the Superintendent A, B, or equivalent. If course is pass/fail, transcre No reimbursement shall be Provide the Superintendent For accounting purposes, the determine the disbursement all the disbursement shall be all though approval of course guarantee that funds will be	an accredited college or university. Ily related to the employees' area of responsibility or to the employees' IPDP. with an official transcript substantiating course completion and final grade of ript must substantiate course was passed. provided for audited course work. 's office with appropriate receipt substantiating amount paid for course work. the date on which the course is scheduled to end shall be the date used to be selection makes the employee eligible for reimbursement it does not
a timely manner.	n 13, of the Master Agreement, I am making application for tuition reimbursement:
a timely manner.	n 13, of the Master Agreement, I am making application for tuition reimbursement:
a timely manner. In accordance with Article VI, Section	n 13, of the Master Agreement, I am making application for tuition reimbursement:
a timely manner. In accordance with Article VI, Section	t Date
a timely manner. In accordance with Article VI, Section Signature of Administrator/Applicant	t Date For Office Use Only
a timely manner. In accordance with Article VI, Section Signature of Administrator/Applicant Approved	t Date For Office Use Only Disapproved
a timely manner. In accordance with Article VI, Section Signature of Administrator/Applicant Approved Derintendent's Signature	t Date For Office Use Only Date Date Date
a timely manner. In accordance with Article VI, Section Signature of Administrator/Applicant Approved Derintendent's Signature con(s) for disapproval:	t Date For Office Use Only Date Date Date