

WILSON AREA SCHOOL DISTRICT

Goldenrod

REQUEST FOR GRADUATE COURSE APPROVAL
TUITION REIMBURSEMENT

Please present two (2) copies of this form to the Superintendent's Office before enrolling.

Name _____ Date _____

School Assignment _____ Subject/Grade Taught _____

Dates of Enrollment _____ College or University _____

Description of Work (course name, number, credits) _____

Approval of Enrollment _____ Date _____

Superintendent

After completing the above work:

- (1) return approved request form, receipted invoice and a transcript showing satisfactory completion of the courses;
- (2) reimbursement is based on 100% of East Stroudsburg University's tuition rate, subject to the following limitations:
 - (a) Maximum reimbursement per teacher will be for twelve (12) credits completed, during a particular contract year (Sept. 1 - August 31), until the attainment of thirty-six (36) credits.
 - (b) Reimbursement after the attainment of thirty-six (36) reimbursed graduate credits will be limited to six (6) graduate credits within every five (5) year period, so that the professional employee can meet the State's continuing education requirement.
 - (c) Professional employees must be on staff of the Wilson Area School District at time of reimbursement.
 - (d) Reimbursement will be made to the employee when all necessary information has been completed and received by the Central Office. If all the required paperwork received by the 20th of the month, reimbursement approval will be made at the next regularly scheduled Board meeting that authorizes bill payment. Checks will be sent to the employee within two (2) days following Board approval.
 - (e) Graduate credits to be reimbursed must be held primarily on a college or university campus, or other location designated by an accredited college or university. Internet, correspondence, or other distance learning courses must be specifically preapproved by the Superintendent on a case by case basis at the sole discretion of the Superintendent.

OFFICE USE ONLY

<u>Date Grades-</u>		<u>Amount</u>		
<u>Receipt Received</u>	<u>Credits Received</u>	<u>Reimbursed</u>	<u>Date Paid</u>	<u>Check No.</u>

Approval of Payment _____ Date _____

Superintendent