



REIMBURSEMENT PROCEDURES ON REVERSE SIDE **TUITION REIMBURSEMENT PROCEDURES**

1. The employee will obtain the *Request for Approval of Professional Development Courses* from the Main Office.
2. The employee will complete form and submit prior to starting date of course for approval by the Administrative Director. (The completed form should be placed in the folder labeled "Requires Signature" (red file).
3. The Administrative Director will approve/disapprove the form and give to his/her secretary.
4. The Secretary to the Administrative director will make a copy of the form and return the copy to the employee.
5. The Secretary to the Administrative Director will forward the original form, if approved, to the Business Office.
6. The ending date of the course will determine the school year for which the funds will be encumbered.
7. Upon completion of the course, the employee will provide, to the Business Office, a legible copy of the payment receipt and the official grade report for the course.
8. Reimbursement will be provided according to the appropriate employment agreement.



REQUEST FOR APPROVAL OF PROFESSIONAL DEVELOPMENT COURSES

DATE: _____

NAME: _____ INSTRUCTIONAL AREA: _____

Course Name: _____ Course Number: _____

Institution: _____ Course Cost: _____

Starting Date: _____ Ending Date: _____ # of Credits: _____

Course meets on _____ from _____ to _____
(Day of Week) (time) (time)

Present Certification Level: _____ Date Issued: _____

Course applies to: _____

Copy of invoice and grade report or transcript must be supplied before reimbursement will be made. Grades of "A" or "B" qualify for 100% reimbursement up to the maximum listed in the applicable contract or agreement. A grade of "C" qualifies for 80% reimbursement. No reimbursement will be made for grades less than "C".

My signature certifies the above information to be true and accurate.

Administrative Director Approval

This section for Business Office use only

Approval: _____

Date: _____

Amount Reimbursed: _____

VC# _____

Account # _____

Date Paid _____

Check # _____