

**RICHMOND HEIGHTS LOCAL SCHOOL DISTRICT**



**APPLICATION FOR APPROVAL OF GRADUATE COURSE WORK  
PARTIAL REIMBURSEMENT OF PAID TUITION**



\$800.00 for the **2023-2024** School Year  
(Begins September 1 – Ends August 31)



Name \_\_\_\_\_ Date \_\_\_\_\_

Current Teaching Assignment \_\_\_\_\_

School Building \_\_\_\_\_

**NOTE TO APPLICANT:**

After approval has been granted, one copy of the application will be returned to you. After you have completed your course, *bring this form and tuition receipt to the Superintendent's Office for reimbursement purposes. **Your official transcript needs to be mailed to or electronically delivered to Human Resources.***



**COURSE REQUESTED FOR PARTIAL TUITION REIMBURSEMENT**

Course Number	Course Name	Course Cost	Name of University	Dates of Attendance From /To	Number of Quarter Hours	Number of Semest Hours

\_\_\_\_\_  
Superintendent's Signature *Approving* Course \_\_\_\_\_  
Date



Official Transcript Received     Tuition Payment Receipt Received    \$\_\_\_\_\_ Amount Approved for Payment

\_\_\_\_\_  
Superintendent's Signature *Approving Payment* for the Treasurer \_\_\_\_\_  
Date