

# NIPPERSINK SCHOOL DISTRICT 2

4213 US Highway 12

Richmond, IL 60071

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Telephone: 815-678-4242

FAX: 815-678-2810

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Dr. Tom Lind, Superintendent  
Denise Levendoski, Business Manager

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Lisa Kuhl, Richmond Grade School Principal  
Chris Pittman, Spring Grove Elementary Principal  
Scott Whipple, Nippersink Middle School Principal

## GRADUATE PROGRAM APPROVAL FORM

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

Masters Program \_\_\_\_\_ 2<sup>nd</sup> Masters Program \_\_\_\_\_ Doctoral Program \_\_\_\_\_

University \_\_\_\_\_ Title of Program \_\_\_\_\_

Applicant's reasoning for program choice \_\_\_\_\_

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### *Request for Program Approval Procedure*

1. Attach copy of program requirements and course syllabus.
2. Submit to Superintendent

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_

\_\_\_\_\_  
Dr. Tom Lind, Superintendent

\_\_\_\_\_  
Date

Superintendent's Comments \_\_\_\_\_

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