

NAME: \_\_\_\_\_



## PROPOSAL FORM – SUPPORT STAFF

### **ARTICLE VIII - COMPENSATION AND FRINGE BENEFITS,**

#### **N. TUITION REIMBURSEMENT, SALARY SCHEDULE ADVANCEMENT AND WAIVERS,**

##### **2. Certified Staff**

- b. Request for credit for tuition reimbursement, tuition waiver or for advancement on the salary schedule from universities other than those on the approved list set by the Communications Committee shall be considered through a proposal to be reviewed by the Communication Committee. All proposals shall be submitted prior to December 10 for the winter term and May 10 for the summer and fall term and must meet one of the following conditions:
  - i. Completed courses that the awarding college or university will accept in an accredited graduate degree program.
  - ii. Completed courses that the Illinois State Board of Education will accept toward Illinois licensure.

##### **Administrative Procedures:**

1. Submit your Course Approval Form and Proposal Form (this form) to the Director of Human Resources before the November Communications Committee meeting for winter courses or the April Communications Committee for summer/fall courses.
2. Provide supporting documentation of course quality
  - a. The university or college must be accredited from one of the accreditation agencies found on United State Department of Education data base.  
<http://ope.ed.gov/accreditation/>
  - b. Completed courses that improve skills related to your assignment or job description
  - c. Completed courses that the awarding junior college or university shall apply towards an associate degree in education or bachelor's degree in education

##### **Documentation:**

- **Accreditation document – List University or Junior College and documentation of accreditation**
- **Describe how the course will improve skills related to your assignment**
- **Course found in associate degree program – provide documentation from catalog or junior college/university website**

##### **OFFICE USE ONLY:**

**Approved:** \_\_\_\_\_

**Denied:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Communication Committee Representative Signature:** \_\_\_\_\_