

COURSE REIMBURSEMENT FORM

The Board agrees to reimburse employees for the cost of course work pursued in a planned degree or other program, as specified by the appropriate collective bargaining agreement and approved by the Superintendent. The Board may also agree to reimburse the cost of course work that is not part of a planned degree or other program, again subject to the approval of the Superintendent. Anticipated use of this benefit shall be communicated through submission of this form **by January 31, 2021**.

Name: _____

School: _____

Position: _____

Full Time/Part Time: _____

College/University: _____

Title of Degree/Program: _____

Please attach a description of the planned degree or program, if applicable; a description of the course(s) for which you intend to register; and a detailed explanation of how the course(s) will improve your practice.

Course No./Title: _____

Credit Hours: _____

Course No./Title: _____

Credit Hours: _____

Course No./Title: _____

Credit Hours: _____

Dates: Summer of 2021 through Spring of 2022

Total Credit Hours: _____

Employee Signature: _____

Date: _____

Principal/Supervisor Signature: _____

Date: _____

Superintendent Signature: _____

Date: _____

After completion of the course, return the following to Alymkan Sydykbekova in the Business Office for reimbursement:

1. A copy of this Course Reimbursement Form, with signatures;
2. An itemized bill for tuition and fees;
3. Bookstore receipt(s) for required texts;
4. A copy of the course grade report; and,
5. A completed Check Request Form.

FOR OFFICE USE ONLY:

Director of Teaching and Learning Signature: _____

Date: _____

Paid \$ _____ on _____