

REGIONAL SCHOOL UNIT NO. 19

CERTIFICATION AND REQUEST FOR COURSE PAYMENT  
PROFESSIONAL STAFF ONLY

NAME \_\_\_\_\_  
(Please print)

BUILDING \_\_\_\_\_

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NON-GRADUATE LEVEL COURSES

<u>COURSE ID. NUMBER</u>	<u>NUMBER OF CREDITS</u>	<u>NAME OF COURSE</u>	<u>INSTITUTION/ ORGANIZATION WHERE TAKEN</u>
_____	_____	_____	_____
_____	_____	_____	_____

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GRADUATE LEVEL COURSES ONLY

I understand that reimbursement for graduate level educational expenses is considered taxable income unless the course qualifies under one of the following exceptions:

- 1) Courses I am required to take by my employer;
- 2) Courses needed for recertification;
- 3) Courses needed to obtain an advanced degree required by my employer, provided the degree is in the field of education;
- 4) Courses needed to maintain or improve my skills in the field of education. (The Internal Revenue Service provides the following examples: for teachers this includes courses in specific subjects, whether or not the teacher teaches that subject, and courses for a teacher to become a guidance counselor or administrator.)

I further understand that reimbursement for graduate courses which qualify me for a different profession (outside education) will be taxable as income to me.

I certify that I took the following course(s) for which I am seeking reimbursement, and have **attached** documentation of the expenses and transcript of grades. I further certify that the reimbursement is not taxable income to me for the reason specified. I therefore ask that no withholding be made on the funds reimbursed.

1)	<u>Course ID#</u>	<u>Course Name</u>	<u>Amount of Reimbursement</u>
_____			

Reimbursement to: \_\_\_\_\_ Date: \_\_\_\_\_ (Office Use Only)

2)	<u>Course ID#</u>	<u>Course Name</u>	<u>Amount of Reimbursement</u>
_____			

Reimbursement to: \_\_\_\_\_ Date: \_\_\_\_\_ (Office Use Only)

Employee  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_