

PROFESSIONAL COURSE APPROVAL FORM

Date of first class: _____ Anticipated date of completion: _____

College/University: _____

Course number & name: _____

Credit hours: _____ Tuition fee: _____ Other fees (registration, books, etc.): _____

Are you requesting that the district pay for this course up front? _____

NOTE: You must submit your final grade once the course is completed. If you receive a grade of less than B, you are required to reimburse the district for the payment of this course.

If you are not requesting that the district pay up front, do you agree to pay your tuition/other fees and your textbook costs and submit for reimbursement after the course is completed and you have received your grade? **YES** _____ **NO** _____ (Reimbursement will not be paid until you submit a copy of this approved form, your course grade and receipts for tuition/other fees. If you receive a grade of less than B, reimbursement will not be paid.)

This course meets requirement number C-____ (below):

- C. Prior approval is not necessary to qualify for reimbursement if any of the following conditions are satisfied:
 - 1. the course is taken as part of a degree granting program to which the student has previously been admitted;
 - 2. the course is clearly within the staff member's field as determined by his/her assignment and the course has forty-five (45) hours of classroom instruction time; or,
 - 3. the course is one that is specifically required for renewal of a current and valid teaching certificate.

DECLARATION THAT NO OTHER PUBLIC FUNDS ARE INVOLVED

I hereby certify that no part or portion of the fees for said course(s) will be paid by any scholarship, grant, other public funds, other public agencies, quasi-public agencies or non-profit foundations. I understand that I am only eligible for reimbursement of fees that I, myself, paid (i.e., textbooks)

Staff Member's Signature

Date

OFFICE ACTION

Approved on: _____ **by** _____, **Supt. of Schools**

Budget line: _____ - _____ - _____ - _____

Budget line description: _____

Recorded by _____

Updated 10/2018