BCR-267

BAKER SCHOOL DISTRICT 5J

Tuition/Professional Development Reimbursement

I, ______________________________, request approval of Tuition/Professional Development Reimbursement in the amount of $ ______________ for the ________ to ________ school year.

I will be taking credit courses through ________________________________.

Dates I will be taking the course: ___________ to ___________.

The course of study I have chosen is ________________________________.

This will enhance my classroom instruction in the following ways:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

1. Approval by your administrator is required before registration.

2. After approval and prior to event, submit this form to the personnel office.

3. After completion of the course, provide the personnel office a copy of your receipt(s) (canceled check, credit card statement, etc.), for tuition/professional development and written verification of satisfactory completion of the course. Reimbursement will take approximately two weeks after receipt of these documents.

Submitted by ___________________________ Date ___________________________

Administrative Approval ___________________________ Date ___________________________

 FOR DISTRICT OFFICE USE ONLY

Date Received: ___________ Amount of Reimbursement: _________________
Transcripts Received: _______________ Receipts Received: _______________
Approved: _______________ Date Approved: _______________

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