

TUITION REIMBURSEMENT REQUEST FORM – PROFESSIONAL

Read and complete the form as directed.

1. The Board will reimburse all unit members (tenured and non-tenured) for a maximum of nine (9) credit hours at \$317.00 per credit earned while participating in a pre-approved course of study.
2. Courses may be taken at any time during the year. Employees must file the completed request for tuition reimbursement with the Board of Education by the following dates:
 - October 15 For Summer courses*
 - March 1 For Fall courses*
 - July 15 For Spring courses*
3. Reimbursement requests will be processed only for grades of "B" or higher.
4. NOTE: See Negotiated Agreement, Article 20.6, for complete reimbursement guidelines.

The following documentation must be attached for payment:

- _____ Official transcript showing grade and credit(s)
- _____ Proof of payment (receipt from institution, canceled check, bank statement, credit card statement)

ALL requested information must be provided. Incomplete packets will be returned.

Name _____ Date _____

School _____

WCPS ID Number _____ Social Security Number xxx-xx-_____

Home address _____

Course Name and Number _____

Semester and Year Completed _____

**SUBMIT COMPLETED FORM AND ATTACHMENTS TO HUMAN RESOURCES:
LINDSEY DARR, COORDINATOR OF HUMAN CAPITAL: TEACHERS AND CERTIFICATION**

(For office use only)

TO: Accounts Payable

Payment authorized \$ _____ Acct.# 01-12-91-00-0-7170-000-00 For Year: _____ - _____

Institution: _____ Course _____

Approval Signatures: _____ Date _____

_____ Date _____