

**APPENDIX C
REQUEST FOR REIMBURSEMENT**

**EVERGREEN LOCAL SCHOOLS
PAY FOR FURTHER TRAINING**

Name _____ Date _____

<u>COURSE NO. TITLE</u>	<u>CREDIT HRS. (Sem. or Qtr.)</u>	<u>TUITION FEE PER HOUR</u>	<u>DATES OF COURSE</u>	<u>TOTAL TUITION PAID PER COURSE</u>

Total Amount of Tuition Paid _____

The Evergreen Board of Education will pay \$225.00 per quarter hour/\$350.00 per semester hour, or the cost of tuition, whichever is less to a maximum of \$1,200.00 per school calendar year.

*Amount requested for reimbursement _____

Amount Approved _____
Signature of Staff Member _____

Superintendent _____ Date _____

*Receipts for tuition cost must be attached to this form.

Reimbursement for courses taken in the summer shall be paid by October 31.
Reimbursement for courses taken during the school year shall be paid by June 30.
Reimbursement for CCP coursework will be reimbursed upon completion and submission of documentation.