

**NORWAYNE LOCAL SCHOOL DISTRICT
TUITION REIMBURSEMENT FORM**

Name _____ Building _____

<u>Course Title</u>	<u>Amount you paid for course</u>	<u>Grade received</u>	<u>Hours</u>
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

Amount to be reimbursed: _____ semester hours x \$300 = _____
OR _____ quarter hours x \$200 = _____

- Did you receive any other type of financial reimbursement for these courses? _____
- If so, what was the amount of reimbursement? _____
- Did you receive any tuition reimbursement during the previous school year? _____

How do these courses relate to your profession?

Tuition Reimbursements are made on Supplemental Pay Dates: DEC. 5, MAR. 20, JUNE 5
Please note: No teacher shall have access to monies from these funds two consecutive years in a row unless monies remain and all other applicants have been paid.

The following will be completed by the LPDC committee:

___ completed TUITION REIMBURSEMENT FORM

___ **official transcript or grade card on college letterhead** showing a "B" grade or better ("P" or "S" for pass/fail courses)

___ credit card receipt (must have your name listed on it), cancelled check, or itemized receipt

Date _____ and time _____ form received by LPDC

Amount approved \$ _____ to be paid on _____

LPDC Chairperson

REVISED 2015