

HBOE REQUEST FOR TUITION REIMBURSEMENT

APPROVED COURSE

Part I – Prior Approval

Course for **Fall Semester** – Submit course for approval to the Superintendent by the **first day of school in September of the current school year**. Upon completion of course, grade/transcripts must be received by **January 30th**.

Course for **Spring Semester** – Submit course for approval to Superintendent by **December 1st**. Upon completion of course, grade/transcripts must be received by **June 30th**.

Course for **One Summer Session** – Submit course for approval to Superintendent by **May 1st**. Upon completion of course, grade/transcripts must be received by **August 31st**.

Online Course – Due to the difference in start and finish time for online courses, applications must be received by the Superintendent **at least three (3) weeks prior to the beginning of the course**. The course will be counted for reimbursement for the semester in which the course ends. All required documentation procedures remain the same.

Applicant must receive a grade of “B” or better, in order to qualify for Tuition Reimbursement.

• **Attach the following to Part I:**

1. *College Course Description with course name and number (from Course Syllabus)*
 2. *Tuition Bill*
 3. *Rate per Credit from College/University*
 4. *Course Schedule*
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Staff Applicant: _____

School/Office: _____

Date of Application: _____

College/University Attending: _____

Rate per credit hour: _____

Course Information:

Course Name: _____

Course Number: _____ Credits: _____

Dates: _____ to _____, _____

Applicant's Signature: _____ Date: _____

Superintendent's Signature: _____ Date: _____

Approval Granted: _____

Approval Denied: _____

Part II – To be completed upon COMPLETION of the Course

Applicant must receive a grade of “B” or better, in order to qualify for Tuition Reimbursement.

• ***Upon completion of course, attach to Part II:***

1. *Tuition Receipt*
 - *Attach necessary document.*
2. *Grade Report*
 - *Attach necessary document.*

Applicant’s Signature: _____

Date: _____

Superintendent’s Approval: _____

Date: _____

Amount

The amount each confirmed candidate receives is the same rate as members of the Collective Bargaining Agreement (CBA) receives per semester, depending on the number of candidates.

Your allowable amount is: _____ for the _____ semester.