

PEQUANNOCK TOWNSHIP SCHOOL DISTRICT
Application for Tuition Reimbursement/Authorization for Reimbursement

Name: _____ Date Submitted: _____

Current Assignment/School: _____ Do you have tenure? _____

College or University: _____

Semester: ___ Spring ___ Summer ___ Fall ___ Winter Date of First Class: _____

Course No.: _____ Title: _____ Credit Hours: _____

Is this course part of a Master's Program or Doctoral Program? ___ Yes ___ No

Is this an online course? ___ Yes ___ No

The following documentation from your institution **must be attached** to this application:

1. Detailed course description.
2. Verification of per credit cost. Fees are **NOT** included in reimbursement.

Cost **per credit** hour **not including fees**: \$ _____ Total Cost: \$ _____

Reimbursement for courses must meet one of the following. Check off one or both and describe.

___ Course is related to current responsibilities. Describe in detail.

___ Course is related to future responsibility in current position. Describe in detail.

Principal Signature: _____

Date: _____

For Reimbursement/Salary Guide Movement, the following is required:

1. Signature of Superintendent prior to attending first class.
2. Completed Request for Tuition Reimbursement form.
3. Copy of cancelled check/receipt.
4. Official transcript with grade sent from institution to Superintendent's Office.

Reimbursement: ___ Approved ___ Denied Credit/Guide Movement: ___ Approved ___ Denied

Superintendent Signature: _____ Date: _____