

2022-23 SWIP REIMBURSEMENT REQUEST FORM

Instructions to Employee—

If you are unsure if you have accumulated SWIP days, you can look on your check stub in the lower left corner at the SWIP Leave balance or email Patty Raker at praker@holdenschools.org to verify. To be reimbursed for unused SWIP days at the end of 2022-23 school year, you must complete the following items by **June 8th, 2023**:

- Login to the District’s Vector On-Line Training system at:
<https://holdenr3-mo.safeschools.com/login>
Your login is your first initial and last name (ex. Wanda Washington’s login would be wwashington)
No password is required.
Once you are in the program it will say “You do not have any training assignments that are active”, but if you scroll to the bottom of the page you will click on the button that says “View Library”. You may click on each of the categories under that button to view the training video options.
- For EACH unused SWIP Day, you will need to watch **2 online videos of your choice**. Most video options are 30 minutes or less in length. If you click on one that was included in the District requirements last Fall, it will come up and say you have already completed this and you will need to choose another video to view.
(Ex. 2 completed videos=1 SWIP Day)
- Once you complete each video and pass the quiz, you will need to print out the Completion Certificates to attach to this form.
- Complete the form below, attach your training completion certificates, and turn in to your Building Principal or Supervisor **no later than June 8th, 2023**. Your Principal/Supervisor will then verify that your professional development is complete and will turn into Central Office **by June 9th, 2023**. Reimbursements will be paid with the regular payroll on **June 20th, 2023**.

Employee---Please complete and sign:

The number of SWIP Days I am requesting to be reimbursed for is _____ days @ \$110 per day.

I verify that I have completed 2 on-line training videos for each SWIP Day, have attached the training completion certificates to this form, and turned into my building principal/supervisor by June 8, 2023.

Employee’s Printed Name

Employee’s Signature

Date: _____

Principal/Supervisor—Please sign and turn into Central Office by June 9, 2023:

I verify that _____ is eligible for SWIP Reimbursement as requested above.

Principal/Supervisor Signature

Date _____