Philomath School District 17J - Request Form
College Credit/Tuition Reimbursement/Obtain Seat Hours

Name: _____ Date of Request: _____

Please Check One Option:

- ☐ College Credit Only
- ☐ College Credit and Tuition Reimbursement *
- ☐ Seat Hours/District Credit **

College Credit/Tuition Reimbursement Requests

Course Number: _____

College/University: _____ Total College Credits: _____

Course Title: _____

Term/Year: _____ Tuition Amount: $_____

Request to Obtain Seat Hours/District Credit

Workshop/Conference: _____ Date of Event: _____

Sponsor: _____ Seat Hours to be earned: _____

Location: _____

Rationale for request:

Print and Submit form to Principal for signature and forward to the District Office for Superintendent approval of college credit/seat hours and/or tuition reimbursement. You will receive a notification of approval via email. Submit final documentation (proof of attendance/completion certificate/grade report/payment receipt) to the District Office when course/workshop is completed for recording purposes and/or reimbursement.

Employee Signature: _____

Principal's Signature: _____ Date: _____

Superintendent's Signature: _____ Date: _____

Please refer to the PEA Agreement, Article 19 for all details/requirements

*Tuition reimbursement must be pre-approved and requested within six months of course completion. The request must include proof of payment, itemized billing statement and a copy of the transcript showing successful completion of the course.

**Seat Hours/District Credit must be pre-approved and request must include class/workshop description and number of seat hours to be earned. Hours must be outside of the regular workday. 20 seat hours equals one District Credit.

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