



# Professional Development

Employee: \_\_\_\_\_ FTE \_\_\_\_\_

Grade/Subject/Assignment: \_\_\_\_\_ Location: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

You may be reimbursed up to \$450 per full time employee (FTE) The full amount will be allocated to all employees with 0.5 FTE or greater. Employees with less than 0.5 FTE shall receive half (50%) of the full allocation of funds. FTE shall be determined based upon the actual contract FTE, and not the annualized contract FTE. All this amount can be spent on supplies, materials, and equipment or professional development. All receipts must be dated between August 1 of the previous year and July 31 of the current school year. All receipts must be originals. (Copies and faxes are not acceptable.)

\_\_\_\_\_ Did you use sub(s)? If so, please give the number of sub days used (include dates). \$235 per day will be deducted from your \$450 allocation.  
\_\_\_\_\_ A single expenditure for a conference, workshop, or class fee of \$150 (amount to be subtracted from the \$450) and over may also be done through use of the district's purchase order process.

**Please write the amount of money to be reimbursed next to the selected item listed below.**

### 1. Professional

\$ \_\_\_\_\_ Cost of tuition to attend a class, workshop, or conference.

Date and time of day attended: \_\_\_\_\_

During school hours? Yes No

\$ \_\_\_\_\_ Mileage to a workshop or conference: \_\_\_\_\_ miles

Destination (to/from) and number of trips

\$ \_\_\_\_\_ Cost for travel accommodations to attend a workshop.

\$ \_\_\_\_\_ Cost involved with any professional growth plan.

\$ \_\_\_\_\_ Cost of required renewal fees, and/or professional licensure fees.

\$ \_\_\_\_\_ Cost involved with any peer coaching arrangement.

\$ \_\_\_\_\_ Cost to implement an in-service activity.

\$ \_\_\_\_\_ Other uses that are reasonably related to providing support and incentive for professional development (does not include classroom supplies and materials).

### 2. Classroom supplies, materials, equipment (up to the full \$450 allowed amount).

All items purchased with professional development funds become the property of the Snohomish School District.

\$ \_\_\_\_\_ Supplies, materials, district approved equipment and printers (must be identified). (Edible supplies are not eligible for reimbursement.)

**Attach original receipts and written explanation of items purchased, if not identified on receipts, and submit to accounting no later than July 31. Please call Accounting about August classes or workshops. Keep a copy of this form and all attachments for yourself in case of loss.**

Certification: I hereby certify, under penalty of perjury, this is a true and accurate claim for necessary expenses incurred by me and that no payment has been received by me on account thereof. I will reimburse any overpayment to Snohomish School District. \*Note - If an employee does not utilize their full allotment of funds per 7.08 A, the district will disperse to the employee an amount equal to the unused funds less required payroll taxes on the August paycheck, provided the amount is not less than \$25.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal/Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Professional Development Verification Procedures

1. The amount of allowable reimbursement shall be determined based upon the actual contract FTE, and not the annualized contract FTE.
2. You must have a Travel Leave Form (yellow) to accompany the professional development form only for activities during the regular working hours. You do not need a travel leave form for summer, weekend, evening, or correspondence classes. You must indicate the date and time of the activity on your Professional Development Verification Form.
3. You may request reimbursement for a class after you have paid for it.
4. To be eligible for the incentive money, an employee, prior to incurring the expense, must submit, on a form provided by the district, a request to the building principal. The principal will verify encumbrances so as to coordinate proposed activities with other school functions. For costs incurred any time between August 1 and July 31, an employee must have submitted such a verification form no later than July 31.
5. You may claim reimbursement for travel expenses, such as mileage, parking, airfare, hotel costs, etc., incurred for a workshop or class.
6. You will be reimbursed for credits or clock hours for a class. Extra charges for processing credits or clock hours will not be reimbursed.
7. All items purchased with professional development funds become the property of the Snohomish School District.
8. All substitutes charged to professional development shall be reported and shall be deducted before any other reimbursement is paid.
9. All supplies and tuition payments must have been purchased between August 1 of the previous year and July 31 of the current school year.
10. An original receipt that shows method of payment (check, credit card, etc.) and the date of the class or the original invoice and a copy of your canceled check or credit card statement (for all expenses you are claiming). Copies and faxes of receipts are not acceptable.
11. Professional development forms must be submitted to the accounting department no later than July 31 and must have proper signatures, receipts, travel leaves (if required), and written explanations to receive reimbursement.



## Professional Development Reimbursement Checklist

When requesting reimbursement for professional development, the following are required:

### Reimbursement for expenses for classes or workshops

- \_\_\_\_\_ Travel Leave Form for any class/workshop that was attended during school hours (even if substitute was not required) with dates, code, signatures, expense amounts, mileage, and substitutes indicated.
- \_\_\_\_\_ Written explanation listing the items being reimbursed, including dates of classes and amounts paid.
- \_\_\_\_\_ An original receipt that shows method of payment (check, credit card, etc.) and the date of the class or the original invoice and a copy of your canceled check or credit card statement (for all expenses you are claiming).
- \_\_\_\_\_ If claiming mileage, write the date, the number of total miles traveled, and the destination. (Example: Snohomish to Seattle, round trip (two trips) = 140 miles)
- \_\_\_\_\_ Declaration of substitute if one was required.
- \_\_\_\_\_ Written explanation summarizing the items claimed for reimbursement.

### Reimbursement for supplies

- \_\_\_\_\_ Original receipts showing the items have been paid (not an invoice with "balance due") or the original invoice and a copy of your canceled check or credit card statement. If you do not receive your canceled checks, then make a copy of your check before payment is made and a copy of bank statement showing that check number being processed. Copies and faxes of receipts are not acceptable.
- \_\_\_\_\_ Signature on each receipt and explanation of what was purchased if the receipt does not describe the items.
- \_\_\_\_\_ Written explanation summarizing the items claimed for reimbursement.

- \_\_\_\_\_ Please sign and date, get your principal/supervisor signature, and send your form to Accounting before July 31. Please also make copies for yourself of all attachments in case of loss.