



Holbrook Public Schools
APPLICATION FOR COURSE REIMBURSEMENT

Date: _____

Name: _____

School: John F. Kennedy Holbrook Middle-High

Grade/Subject: _____

Course Title: _____

Institution: _____

Dates enrolled: From: _____ To: _____

Credits: _____ Course grade: _____ Tuition: _____

I hereby request course reimbursement in accordance with the provisions of the H.E.A. contract, article xxx, section A.

Staff member's signature: _____

In order to ensure timely distribution of funds, employees seeking reimbursement must submit each of the following by June 15 prior to the fiscal year in which the course is completed:

1. Reimbursement form
2. Proof of payment
3. Transcript showing the grade earned, subject to the substitutions below.

In the event the employee has completed the course but has not received the transcript by June 15, the employee may submit notice of completion in lieu of the transcript. In the event the course ends between June 15 and the end of the fiscal year, the employee may submit notice of anticipated completion in lieu of transcript. Upon receipt, the funds will be encumbered on behalf of the employee but will not be released until the District receives the transcript.

SUPERINTENDENT'S APPROVAL:

Application for reimbursement meets the requirements of above cited contractual agreement and is hereby approved for payment.

Superintendent of Schools

Date of approval

CONFIRMATION OF RECEIPT AT CENTAL OFFICE:

Received by: _____

Date and time stamp: