



F S D 1 4 5

Freeport School District

REIMBURSEMENT AND/OR ADVANCEMENT APPLICATION

This is to notify Freeport School District #145 that I have satisfactorily completed the following courses:

Course #	College or Name of Workshop	Location	Sem. Hrs.	CPDU's

I am applying for reimbursement and/or credit as follows: (Please check appropriate boxes.)

- _____ A. Educational Assistance (Grade card accepted). Tuition fees or workshop fees are reimbursed if the course is taken within the guidelines of Freeport School District. I would like to be reimbursed 100% of my tuition/workshop fees using the educational assistance credit I have available. The reimbursement I am requesting is \$ _____. A copy of the canceled check and/or itemized receipt(s) is attached.
- _____ B. Required Advanced Study, 5-5 (For teachers less than BA+20 level. Grade card accepted.)
- _____ C. Salary Schedule Advancement (Official Transcript is required.)
This advances me from the _____ column to the _____ column.

I understand requests for salary schedule advancement must be made no later than the fifth teacher duty day of the school year. I also understand that I may furnish the official transcript of grades anytime until December 1 of the school year. I further understand that if I receive a salary increase due to items checked above and fail to provide the necessary official transcript of grades by December 1, I shall have my salary for the remainder of the school year reduced by the amount of incorrect overpayment.

Date _____ Signature _____

* 1 CEU = 16 hours of contact time

Office Use Only		
Waiting On _____	Workshop _____	Grade Card _____
Sal. Sched. Adv. (in computer) _____	Sem. Hrs. _____	Transcripts _____
Excel spreadsheet _____	Board Packet _____	Board Packet Mtg. _____
Reimbursement \$ _____ Date _____	HR Signature _____	