## **APPLICATION FOR PROFESSIONAL DEVELOPMENT REIMBURSEMENT**

This form must be completed by licensed staff for reimbursement for tuition, conferences and workshops.

## **PRIOR APPROVAL**

Obtain principal permission before you take the class. This is required by contract if you request reimbursement.

APPROVED	REJECTED				
		Principal's Signature			Date
		Reason for rejection:			
		APPLICATION			
Name:				Date:	
Assignment: School:					
Explain how this a	pplication relates di	rectly to the CDIP, SIP or your (	CPD/PDU requ	irements:	
	this application is bursement (Complete Secti		•		Irsement (Complete Section II)
Course Title and N					
Number of Credits					Fall Winter Spring
Last date and term		ursement from the District: Year	•	Term (circle	one): Sum Fall Win Spr
Are you receiving	funding from other	sources? (circle one) yes no			-
If yes, explain	-				
	Section II.	Vorkshop or Conference Reim	bursement (10	0-2529-243-0	<u>)13)</u>
Workshop or Confe	erence Title				
Date of Workshop or Conference(s) Cost					_
Is a substitute requ	ired? (circle one) yes	no If substitute is requir	ed, for how ma	any hours o	or days?
		FINAL APPROVA	<u>AL</u>		
Superintendent'.	s Signature				Date
<ol> <li>All courses, works</li> <li>To receive Tuition</li> <li>Successfully</li> </ol>	shop or conference relat shops or conferences m n Reimbursement, the a	es directly to the CDIP, SIP and/or indi- ust have prior approval of the principal a oplicant must: h a Pass or C or better grade.	vidual's CPD prog and superintenden	gram. t.	

- Present an official transcript or grade slip.
  To receive reimbursement for workshops or conferences, the applicant must:
  Verify completion of the workshop or conference.
- Present a receipt or cancelled check. •

Copies: Principal Teacher **Business** Office Personnel File

4.

10/18/94, REV 3/30/95 3/23/00, 04/25/00, 1/9/03, 6/4/09, 4/13/11