



**BOARD OF EDUCATION OF WICOMICO COUNTY
Salisbury, Maryland**

REQUEST FOR COURSE/WORKSHOP APPROVAL & TUITION REIMBURSEMENT

NAME _____ EMPLOYEE # _____
LAST FIRST MIDDLE

COMPLETE HOME ADDRESS _____

TEACHING ASSIGNMENT _____ SCHOOL _____
(GRADE AND/OR SUBJECT)

DATE SUBMITTED _____

| Semester | Course Number | Title of Course | Semester Hours | College or University / Workshop Sponsor | Tuition Fee |
|----------|---------------|-----------------|----------------|--|-------------|
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- ❖ Any grade reports or receipts required to verify completion of course work should be submitted at the end of each college term and must be submitted **no later than June 30 of the school year in which the course work is completed.**
- ❖ Reimbursement is made in September for the previous spring and summer allowances; by February for the previous fall.
- ❖ Verification of tuition paid (cancelled check or receipt) must be submitted along with an ***official transcript.***
- ❖ Neither reimbursement nor renewal credit will be granted for any grade less than **C.**

Reference: ***Tuition Reimbursement Article 14.5 of Negotiated Agreement.***

FOR OFFICE USE ONLY

APPROVED FOR CREDIT _____

APPROVED FOR CREDIT & REIMBURSEMENT _____

DISAPPROVED _____

SIGNATURE _____ DATE _____

| HUMAN RESOURCES OFFICE | FINANCE OFFICE |
|---|---------------------------------|
| Grade _____ Amount Approved _____ | Date Paid _____ Check No. _____ |
| Approved for payment _____ <small>HUMAN RESOURCES/DATE</small> | Acct. to be Charged _____ |
| Acct. to be Charged _____ | Approved by _____ |