

LISBON EXEMPTED VILLAGE SCHOOL DISTRICT

The Master Agreement states each bargaining unit member will receive six (6) semester credit hours of work toward the master' degree, renewal or upgrade of certificate/license per contract year. The 6 semester credit hour per year reimbursement will be good for the period from July 1, 2021` until June 30, 2023. All courses shall be approved by the Superintendent prior to taking the course. Approval will be granted when hours taken are within area of certification, teaching, or teaching assignment. Courses outside the area of teaching or assignment may be granted by the Superintendent. Reimbursement will only be paid for graduate level courses. No payment will be authorized until the Superintendent's Office receives an official transcript of grades from the college or university. Please see the Tuition Reimbursement Section of the Master Agreement for further information on approval/reimbursement.

APPLICATION FOR TUITION REIMBURSEMENT			
Teacher's Name: _____		Date: _____	
Present Teaching Area: _____		Building: _____	
College or University: _____			
Graduate Level Course: _____			
	Title	Course Number	# Semester Hours
Type of Class	<input type="checkbox"/> Classroom/Workshop _____ <div style="text-align: center; margin-left: 100px;">Site</div>		Beginning/Ending Dates
	<input type="checkbox"/> Online	<input type="checkbox"/> Video	<input type="checkbox"/> Independent Study
	<input type="checkbox"/> Other (explain) _____ _____		
<input type="checkbox"/> Denied	_____		
Date: _____		Superintendent's Signature: _____	
<u>The following must accompany this form:</u>			
<input type="checkbox"/> Tuition Invoice (Printed when enrolling for course)			
<input type="checkbox"/> Receipt showing tuition was paid			
<u>At the completion of the class, a transcript must be sent to the Board of Education Office by the College or University to authorize reimbursement</u>			
<input type="checkbox"/> Transcript			

AUTHORIZATION FOR REIMBURSEMENT PAYMENT		
_____ Semester Hours @ \$200.00	\$	_____
_____ Quarter Hours @ \$150.00	\$	_____
Date: _____	Superintendent's Signature: _____	