CERTIFIED STAFF TUITION REIMBURSEMENT

A. Tuition Reimbursement

The Board agrees to grant allowances to individual certificated and licensed personnel for tuition reimbursement according to the following guidelines:

- 1. Teachers may not claim both tuition reimbursement and workshop compensation.
- 2. All credits require prior approval by the Supervisor, Director, and Superintendent on a standard form supplied by the Board in advance of registering for a course in order that an applicant be eligible for reimbursement. The Superintendent shall approve all applications which meet the criteria established in this Article. The Superintendent will respond to the applicant within fifteen (15) working days after they have received the request.
- 3. Credits must be earned in a course from an accredited college or university, they must be pre-approved by the LPDC and be pursuant to the individuals current educational plan.
- 4. Course work must be scheduled at times that do not interfere with normal duties during the regular work day of the employee.
- 5. No certificated personnel will receive tuition reimbursement credit for more than twelve (12) semester hours or eighteen (18) quarter hours per calendar year.
- 6. In order for a teacher to be eligible for reimbursement, proof of payment for the requested hours and an official grade report from the college or university showing a "C" grade or better, or a passing grade in the case of a pass/fail course or in the case of a satisfactory/non-satisfactory course, must be filed with their immediate supervisor who will in turn submit approval to the Treasurer's Office.
- 7. To be eligible for reimbursement, the request must be submitted no later than September 15.
- 8. Reimbursement shall be applied towards course work taken during the year (between September 1 and August 31) and paid the following October for those staff members returning for the next school year. When the Treasurer has received those items described in the foregoing stipulations. The reimbursement formula will be as follows:
 - a. Maximum per hour will be \$300.00 per undergraduate semester hour and \$400.00 per graduate semester hour. Quarter hours will be reimbursed at \$150.00 per quarter hour for undergraduate and \$180.00 for graduate hours.
 - b. The Treasurer shall allocate a combined maximum of Twenty-Two Thousand Five Hundred Dollars (\$22,500.00) for teachers and support staff for tuition reimbursement each year.
 - c. Reimbursement per hour = \$22,500.00 divided by the total approved hours up to the maximum described in 8.a. above.
- 9. No teacher will be reimbursed by the Board if he/she receives grants, payments, or scholarships from some other source for tuition. If the grant payment or scholarship does not cover the full cost of tuition, the teacher may apply for the difference up to the maximum allowed.
- 10. If classes are not to be completed within one (1) year of the approval, the teacher must notify the Board at the time the request for approval is made, and reimbursement will not be made for completed courses until October of the following year when classes are completed. ALL classes must be completed within two (2) years of approval.

BELMONT-HARRISON VSD

TUITION REIMBURSMENT PRE-APPROVAL FORM

NAME:	POSITION:				
SUPERVISOR: Course Number & Title	Collogo/University	Cost per Credit Hrs Credit Hr.	Semester/	Grad./ Undergrad	Anticipated Start Date
Course Number & Title	College/University	Cledit HIS Cledit HI.	Quarter S / O	G / U	/ /
				G / U	/ /
			S / Q	G / U	/ /
			S / Q	G / U	/
			S / Q	G / U	/ /
			S / Q	G / U	/ /
negotiated agreement. Signature	Date				
Approve Disapprove (Ex	xplain below)	Approve	Disapp	prove (Explain	n below)
LPDC Chair Signature	Date	Supervisor Signature		Date	
Approve Disapprove (Ex	xplain below)				
Superintendent Signature	Date				
Explain/Comments					

Brief explanation of how course(s) will benefit you in your current position:

BELMONT-HARRISON VSD

TUITION REIMBURSMENT REQUEST FORM

NAME:			POSITION:				
SUPERVISOR:		_					
Course Number & Title	College/University	Credit Hrs	Cost per	Semester/ Quarter	Grad./ Undergrad		ate pleted
				S / Q	G / U	/	_/
				S / Q	G / U	/	/
				S / Q	G / U	/	_/
				S / Q	G / U	/	/
				S / Q	G / U	/	/
				S / Q	G / U	/	/
I affirm that the above informatio if I do receive reimbursement or to Signature							rstand that
Approve Disapprove (Explain below)			Approve	Disappı	rove (Explain	ı below)	
LPDC Chair Signature	Date	Supervisor	Signature		Date		
Approve Disapprove (l	(Explain below)						
Superintendent Signature	Date						
Explain/Comments							