

TUITION REIMBURSEMENT ISSUE CHECK FORM

___ Teacher
 ___ Principal
 ___ District

Date: _____

Issue Check To: _____

List each course taken including course number, course name & semester hours.

Course #	Course Name	Semester Hours	Amount Due

TUITION REIMBURSEMENT SCHEDULE

85% reimbursement, up to \$380/credit hour Max. \$4,560 yearly

The Board reserves the right to change the maximum allowable reimbursements depending on available funds, but the allowed amount shall not be less than \$10,000 without approval of the Amboy Education Association.

ISSUE CHECK IN THE AMOUNT OF: _____

Signed _____ Teacher

Signed _____ Principal

Signed _____ Superintendent

FOR OFFICE USE

Tuition Amount _____ Hours _____ % Amount _____ Hourly Amount _____ Total Due _____	Approved Date _____ Approved By _____ Charge to Account _____
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