

Rockdale Elementary School District 84 715 Meadow Avenue Rockdale, IL 60436 Phone: 1-815-725-5321 FAX: 1-815-725-3631

#### COURSE REQUEST FOR REIMBURSEMENT PROCEDURES AND FORM

#### Please complete this form for the 2023-2024 school year.

Please read and complete as needed.

#### **1. POLICY AVAILABLE IN TEACHER CONTRACT - SECTION 9.6**

This certifies that you have read and discussed any questions in regards to the procedures that can be found in the most current teacher contract.

#### 2. REIMBURSABLE AMOUNT FOR THE 2023-2024 SCHOOL YEAR

The reimbursable amount once pre-approved by the superintendent is currently \$1000. This will apply for July 1- 2023 - June 01 2024.

#### **3. TYPE OF COURSEWORK**

Coursework should be done at an accredited College or University. This should be proven with a copy of a form that is most likely available on the school website. This should be presented to Dr. Merritt at the time of the request along with this form. Subjects taken should pertain to improving their understanding of their current position or working toward another educational avenue.

#### 4. PRE-APPROVAL OF COURSEWORK

You will wish to meet with Dr. Merritt or forward all of the needed information by email to him for pre-approval of reimbursement. Form needed for pre-approval will be available below and do not forget to include evidence that the University or College providing the coursework is accredited.

#### 5. COMPLETION OF CLASS

Upon completion please provide Dr. Merritt with the completed reimbursement form, <u>an official transcript</u> <u>sent directly to Rockdale SD84 from the school that provided the coursework along with proof of payment.</u>

#### 6. REIMBURSEMENT

Once everything has been submitted we will forward all the items to the bookkeeper for payment once approved.

## Congratulations!!!



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### PRE-APPROVAL COURSE REIMBURSEMENT FORM

NAME:

CLASS NAME: \_\_\_\_\_

NAME AND ADDRESS OF ACCREDITED UNIVERSITY OR COLLEGE:

**PURPOSE OF THIS CLASS:** 

# Remember to provide proof of the university or college's accreditation to present to Dr. Merritt along with this form.

SIGNATURE AND DATE OF APPLICANT

SIGNATURE AND DATE OF APPROVING ADMIN DR. MICHAEL MERRITT - SUPERINTENDENT



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## **Rockdale Tuition Reimbursement Form**

#### E. Tuition Reimbursement Provision

The board shall reimburse each teacher up to \$1000 per fiscal year (July 1 - June 01) for graduate courses as well as prior district approved undergraduate courses. Teachers planning to take advantage of this reimbursement must seek prior approval of the Superintendent. The request for approval must be on the appropriate District form and shall constitute an intention and not an obligation. Reimbursement for such classes will be made following the next School Board meeting after a teacher shows evidence of tuition cost and satisfactory (C Average) completion of the course. The Official Transcript should be sent directly to Rockdale SD84.

Why are the Official Transcripts Necessary? Per administrative code within the IL School Code, we are required to obtain official transcripts from the University when courses are completed. This is applicable when submitting transcripts for both movement on the salary schedule and for tuition reimbursement.

Name of Staff:
Current Position:
Proposed coursework of Study:

Please propose all course work you are planning to take from July 1, 2023 to June 01, 2024. As you sign up for coursework use this document to ensure that you will get the benefit described above. Coursework not approved by the Superintendent will not be reimbursed.

Coursework needs to be completed (Grade and tuition proofs) by May 24, 2024 to receive reimbursement.

Signature of Superintendent:

Michael Merritt, Ed. D.
Rockdale School District #84
1-815-725-5321

Date