

The forms for Request for Individual Course Approval and for Reimbursement Forms are below and must be sent to Karen Fitzgerald in the Superintendent's Office, 869 Mass Avenue, 6th Floor, Arlington, MA.

Once received by Karen Fitzgerald, Superintendent Bodie will approve The Request for Individual Course approval and Reimbursement Form and the process will begin. A Purchase Order for the amount of the course(s) will be prepared and sent to Business Office to be processed and encumbered into the budget for that school year.

As soon as the course is completed the teacher/administrator **must provide** Karen Fitzgerald **proof of payment** and the **original** college transcript to be reimbursed. All documents should be sent to Karen Fitzgerald in the Superintendent's Office.

Arlington Public Schools
Request for Approval of Individual Course and Reimbursement Form
AEA Form

DATE: _____

PO# _____

Date Received in Superintendent's Office

PRINT NAME: _____

PRINT HOME ADDRESS: _____

Which subject do you teach ? _____ Which school do you teach at? _____

YOUR SIGNATURE: _____

PRESENT DEGREE

	BA/BS
	BA+15
	MA
	MA+15
	MA+30

WORKING TOWARD Salary Lane

	BA+15
	MA
	MA+15
	MA+30
	MA+60

COURSE DETAILS:

FULL TITLE _____

DATE OF COURSE _____ COLLEGE/UNIVERSITY/ _____

NUMBER OF CREDITS: _____ TUITION COST: _____

DEPT CHAIR/PRINCIPAL REVIEWED & APPROVED BY : _____ DATE: _____

PLEASE NOTE PER AEA CONTRACT: REIMBURSEMENT WILL BE AT THE AVERAGE STATE TUITION CALCULATION OF: **\$255 PER CREDIT AND NO MORE THAN 12 CREDITS PER SCHOOL YEAR.**

In order to obtain credit for a course, approval prior to the start of the course must be obtained. Submit a separate request form for each course. All requests must be submitted two weeks in advance of the course starting.

APPROVED FOR REIMBURSEMENT: _____ DATE: _____

Superintendent's Signature

This ORIGINAL FORM will be kept in Supt Office and a copy will be sent back to you once approved.

To Receive Reimbursement: Once course has been completed, please send the following documents:

1. Send Proof of Payment, (copy of cancelled check or credit card payment), AND,
2. Copy of this approved form (Request for Approval of Individual Course and Reimbursement Form), AND
3. Send Original Transcripts TO:

Karen Fitzgerald
Arlington Public Schools
Superintendent's Office, 6th Floor
869 Massachusetts Avenue
Arlington, MA 02474