

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.

ARINGTON PUBLIC SCHOOLS

REQUEST FOR APPROVAL OF COURSE & REIMBURSEMENT FORM

DATE: _____

PO# _____

Print Name: _____ WHERE DO YOU TEACH: _____

Address: _____ Town: _____ Zip Code _____

Current Degree _____

Course Details: _____

College or University: _____

Course Dates: From: _____ To: _____

Tuition (Excluding lab fees, books, etc.): _____ Credits _____

PER THE AEA CONTRACT you must be of professional status and reimbursement will be at the average state tuition calculation of \$286 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.

Please submit completed form to Karen Fitzgerald in the Superintendent's Office.

This ORIGINAL FORM will be kept in the Superintendent's Office and a copy will be sent back to you once approved.

Approved by: _____
Dept. Head/Principal Date

Approved by: _____
Kathleen Bodie, Ed.D Date
Superintendent of Schools

REQUIRED DOCUMENTATION

Once course is completed: Send the following documents to: Karen Fitzgerald, Arlington Public Schools, Superintendent's Office, 869 Massachusetts Avenue, 6th Floor, Arlington, MA 02476

_____ Copy of this signed request for course approval and reimbursement.

_____ Official Transcript of the course and passing grade (official transcript required, per AEA contract)

_____ Proof of payment of the course (cancelled check or credit card statement)