

Blue Hills Regional Technical School
Course Approval/Reimbursement Form



From Article XXIV of the Collective Bargaining Agreement: 24.2.2 All courses for which a teacher seeks reimbursement must have the advance approval of the Superintendent-Director or his/her designee. The reimbursement amount for courses taken will be two hundred dollars (\$200.00) per credit and other expenses directly related to the course of study or institutional charges. No teacher may receive more than one thousand two hundred dollars (\$1,200.00) in any fiscal year. Reimbursement shall be paid within forty-five (45) days of the submission of evidence of course completion and proof of payment up to District cap of thirty-six thousand dollars (\$36,000.00) per fiscal year. An e-mail or printout of a passing grade report from the institution shall satisfy the evidence requirement. Courses must be approved and completed in the same fiscal year; no reimbursement will be made for courses approved or completed in a prior fiscal year. (Note: the fiscal year requirement applies to reimbursement. Lateral movement is not impacted by this requirement).

Section I. Course Information

Print Name: _____ Date: _____
Course Title: _____ Credits: _____
(Please attach a description from the college/university catalog)
Institution Granting Credits: _____
Total Cost of Course: _____ Reimbursement Requested (amount): _____
Initial HERE if this course is not eligible for reimbursement, or if you are not submitting for reimbursement: _____
Check all that apply:
 Graduate Level Undergraduate Part of Degree Program Intended for lateral movement
Fiscal Year: _____ *(Note: see requirement above for reimbursement)*

Section II. Course Pre-Approval (office use only)

Supervising Administrator: _____ Date: _____

Principal: _____ Date: _____

Superintendent Signature: _____ Date: _____

Course is: Eligible for reimbursement Eligible for lateral movement
 Eligible for reimbursement and lateral movement

Request Denied – Initial _____ Reason _____

Purchase Order Number (Business office use only): _____

****This form, when fully signed, will be filed with Human Resources, and a copy returned to the employee.****

For Final Reimbursement: Submit this fully signed original course approval form, transcript/grade report, and proof of course payment (receipt and cleared check or credit card/bank statement) to the Business Office for reimbursement. **Reimbursement requests must be received by June 15th.**