

**Oyster River Cooperative School District - SAU #5
Request for Pre-Approval of Tuition Reimbursement**

The purpose of this form is to request pre-approval for reimbursement for coursework completed at an institution of higher education other than the University of New Hampshire.

This form is to be used when a course is not offered at UNH and the course has been deemed, by the school principal, to be necessary for the continued professional growth of the staff member and will be beneficial to the District's mission. The school principal will utilize this form to request approval from the Superintendent to reimburse the staff member for tuition only; all other fees associated with coursework are the responsibility of the staff member. Justification must be attached to this form prior to submitting it to the superintendent for approval. Please note that all available funds for reimbursement are based on annual budgeted amounts at individual schools.

To: Superintendent Date: _____

Principal: _____ School: _____

Professional Staff Member: _____

Current Teaching Assignment: _____

Name and Address of Institution of Higher Education: _____

Tuition Cost \$ _____

Account # : _____ Balance to date: \$ _____

Proof of course completion required prior to reimbursement. Staff must have a grade of "C" or better or a designation of "pass" if the course is available in a pass/fail basis only. (See IX: Professional Improvement, Section B).

Proof of course completion received on: _____.

Statement of Demonstrable Need

As the Principal, I attest that the Professional Staff Member's enrollment in this course is necessary for the continued professional growth of the staff member and will be directly beneficial to the District's mission.

Professional Staff Member's Signature: _____ Date _____

____ Request Recommended _____ Date _____
____ Request Denied _____ Principal's Signature

____ Request Approved _____ Date _____
____ Request Denied _____ Superintendent's Signature

____ Justification is attached.