



**WEST BRANCH AREA SCHOOL DISTRICT
516 ALLPORT CUTOFF
MORRISDALE, PA 16858**

Employee Name _____
Print Legibly

REQUEST FOR CREDIT REIMBURSEMENT

Title of Course: _____
Name of Institution: _____
Post Baccalaureate Credit: _____ College _____ Intermediate Unit

Qualifies for: _____ Permanent (Instructional II) Certification—Tenure to 24 credits
_____ Degree Program (Master’s, Doctoral)
_____ Area of Certification (current certified assignment)
_____ Certification Program beyond Master--requires attachment of form entitled
“Request for Pre-Approval for Certification Program beyond Masters”
_____ Other--requires attachment of form entitled “Request for Pre-Approval for
Coursework Related to Instructional Assignments” (maximum 2 courses per
year July 1 to June 30, maximum reimbursement as per contract)
_____ Tenure to or above 24 credits, or (maximum 15 credits per year July 1 to June 30)

_____ Number of credits x _____ Received voucher \$ _____
\$ _____ cost per credit = _____ (Must be attached)
\$ _____ cost for course
\$ _____ % of credit cost = **(see below)** Maximum Reimbursable amount* \$ _____

80% reimbursement for obtaining a grade of a ‘A, B or PASS’

All credits must be taken at accredited at college or university recognized by the Pennsylvania Department of Education or Intermediate course recognized by the Pennsylvania Department of Education. Credit will not be reimbursed unless prior approval from Superintendent.

Credit or course reimbursement shall be made with all regular bills.

* A copy of your official transcripts showing your final grade is required to be attached to this form.

By signing below the employee affirms to abide by Article V, Section F, Paragraph 1 of the CBA dated July 1, 2013 through June 30, 2016.

Submitted by: _____
Employee Signature Date

Reviewed by: _____
Business Manager Signature Date

Approved for payment: _____
Superintendent Signature Date

It is the policy of the West Branch Area School District not to discriminate on the basis of race, color, age, creed, religion, gender, sexual orientation, ancestry, national origin or handicap/disability in its educational programs, activities, or employment. Services and facilities are accessible to and usable by disabled persons as required by Title IX, Section 504 and Title VI.