



# West St. Francois County R-IV Schools

## Tuition Reimbursement Request

<b>PDC use only:</b>
Date Reviewed: _____
Approved: _____
Not Approved: _____
<i>(See comments if not approved)</i>

Name: \_\_\_\_\_ Building: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Institution	Semester	Course Code	Course Description	Credit Hours	Grade

I understand that a receipt and grade report must be on file in the Office of the Superintendent of Schools before reimbursement can be initiated. Only courses completed during the summer previous to the start of the current school year to and including the spring of the current school year.

I understand that in order to receive tuition reimbursement payment, I must have all required paperwork approved no later than June 1st, of the current school year. ***Tuition reimbursement we be distributed according to the district professional development plan guidelines.***

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Superintendent: \_\_\_\_\_

Date: \_\_\_\_\_