

**EAST DUBUQUE
TUITION REIMBURSEMENT & SALARY ADVANCEMENT**

Name: _____

- a. Enrolled in a Masters Degree Program? (if no skip to letter d) Yes___ No___
b. Start Date of Masters Degree Program? _____
c. Requesting Tuition Reimbursement? Yes___ No___
d. Requesting Advancement on Salary Schedule? Yes___ No___

University or College: _____

Name of Course: _____

Date of Class: _____ Number of Credits: _____

University or College: _____

Name of Course: _____

Date of Class: _____ Number of Credits: _____

Tuition Reimbursement Calculation:

Reimbursement will be one half of the cost per credit hour up to maximum listed below.

\$ _____ (X) 50% = \$ _____
Cost per credit Per credit reimbursement
(\$250.00 max 2017-18) (\$300.00 max 2018-19) (\$350.00 max 2019-20)



(X) _____ = \$ _____
of Credits Tuition Reimbursement

Superintendent

Date

To receive reimbursement the following must be submitted to the District Office:

- 1. A copy of the billing statement showing payment**
- 2. An official transcript upon completion of the course.**