

WPS COURSE TUITION REIMBURSEMENT APPLICATION

2015-2016

All requests must be completed in full for consideration - Incomplete applications will NOT be processed.

Name of Applicant	<input type="text"/>	<input type="checkbox"/> Unit A	<input type="checkbox"/> Unit B	Date	<input type="text"/>		
School	<input type="text"/>	Grade Level	<input type="text"/>	Content Area	<input type="text"/>	Other	<input type="text"/>
Applicant's Phone Number	<input type="text"/>	School Email	<input type="text"/>				

COURSE TUITION REIMBURSEMENT INFORMATION

Course Title	<input type="text"/>			
University/College/Organization Issuing Credit	<input type="text"/>			
Course Start Date	<input type="text"/>	Course End Date	<input type="text"/>	
Check All that Apply	<input type="checkbox"/> Face-to-Face	<input type="checkbox"/> Online	<input type="checkbox"/> Graduate Credit	<input type="checkbox"/> PDP's
Have you registered or prepaid any costs associated with the above request?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
If yes, indicate the date you pre-registered for the course.	<input type="text"/>			
Provide a brief description of the course including expected outcomes for students.	<div><div></div></div>			

COURSE TUITION REIMBURSEMENT AMOUNT REQUESTED

- ✓ I understand that any and all proposals must be submitted to the WPS Professional Development Committee in accordance with the Unit A & Unit B PD Application Schedule prior to participating in professional development.
- ✓ I understand this approval is contingent upon my willingness to provide future professional development for Westfield Public School District.
- ✓ I understand that I must not register or pre-pay any costs prior to approval. Initial: _____

Signature of Applicant

Date

Signature of Principal (Required)

Date

Comment _____

For PD Committee Use Only: ___Approved ___Not Approved ___Incomplete ___Recorded

Funding Source: District: _____ Individual _____

Revised 9-21-15 Green Form

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District Strategic Objective: Staff Development

Develop a focused, coordinated staff development program to cultivate the professional skills of all staff.

WPS PD Goals:

- To provide high quality professional development that focuses on increasing teachers' expertise in teaching to high standards.
- To improve teacher effectiveness with high quality professional development training that will result in increased student achievement and narrowing student achievement gaps.

Unit A & Unit B Professional Development PD Application & Committee Meeting Schedule 2015-2016 School Year

Unit B Meeting Time: 2:30 PM - 3:00 PM @ Westwood Conference Room

Unit A Meeting Time: 3:15 PM - 4:30 PM @ Westwood Conference Room

All PD applications MUST BE submitted in advance for approval.

Deadline for Submitting Applications 2 Working Days Prior to Meetings	PD Committee Meeting Dates
Monday August 24, 2015	Wednesday August 26, 2015
Monday September 21, 2015	Wednesday September 23, 2015
Monday October 19, 2015	Wednesday, October 21, 2015
Monday November 16, 2015	Wednesday November 18, 2015
Monday December 14, 2015	Wednesday December 16, 2015
Friday January 15, 2016	Wednesday January 20, 2016
Monday February 22, 2016	Wednesday February 24, 2016
Monday March 14, 2016	Wednesday March 16, 2016
Monday April 25, 2016	Wednesday April 27, 2016
Monday *May 16, 2016	Wednesday May 18, 2016
*All Year End PD Application Requests Must Be Submitted by May 16, 2016 to Encumber Funds and Meet the Business Office Year-End Procedures	
June 13, 2016 (Summer Applications Reviewed)	June 15, 2016 (Summer Applications Pending July 1, 2016 Budget Approval)

Please contact Laura Surprise in the Office for Assessment & Accountability at 642-9320 or lsurprise@schoolsofwestfield.org for all questions regarding Unit A & Unit B Professional Development

Tuition Reimbursement:

Applications may be submitted for course reimbursement for **tuition cost only** under the following guidelines:

1. The PD Committee shall reimburse a professional employee for tuition of an outside course **approved in advanced in accordance with contractual language**.
2. The course shall be directly related to the employee's area of teaching or supervisory responsibility.
3. Reimbursement shall be contingent upon the employee's obtaining a satisfactory grade.
4. Tuition reimbursement for approved coursework **will require** the following:
 - a. A copy of the grade transcript sent to the Office of Assessment & Accountability.
 - b. A final grade documented as a passing grade of *B* or *higher*.
5. Professional employees applying for course tuition reimbursement will be reimbursed on a first-come, first-serve basis.
6. An employee may apply for course tuition reimbursement for more than one course in any contract year and will be reimbursed for such additional courses, providing there are funds available after reimbursing all employees who have taken only one course. Such requests for reimbursement must be received no later than April 15th of the given school year.

For PD Committee Use Only: ☐ Approved ☐ Not Approved ☐ Incomplete ☐ Recorded

Funding Source: District: _____ Individual: _____

Revised 9-21-15 Green Form