

Email the form to: bguhne@jacksonsd.org

After approval, this form will be emailed and interschool mailed back to you; register for approved classes.

Retain form to resubmit after successfully completing the classes (grade of B or better) according to the Timeline.

Applicant's Name	Jackson Location	School Attending	Date Submitted
	Prior to 5/1/20	Summer 2020	Oct. 2021
	Prior to 9/1/20	Fall 2020	Oct. 2021
	Prior to 1/1/21	Spring 2021	Oct. 2021

I feel the course(s) qualify for reimbursement because (check all that apply)

This course is part of a matriculated graduate program in education or in my subject area.

This is a graduate course in subject matter relevant to my certification and/or teaching assignment.

I understand that course descriptions may be requested in order to determine eligibility for reimbursement.

Approved

Denied

Dan Baginski, Assistant Superintendent

Date

ABA Review

Denial Reason:

Emailed & Interschool mailed on:

Date:

Complete Part II - _____ after successful completion of the course(s).

_____ for each class that you are seeking reimbursement.

Highlight the course, grade, credit hours, and proof of payment on the attachments.

Return the completed Tuition Approval/Reimbursement form with attachments to bguhne@jacksonsd.org

Grade B or

Better Credit Hours

Section # Semester Year

