

# KUTZTOWN AREA SCHOOL DISTRICT PROFESSIONAL EMPLOYEE TUITION REIMBURSEMENT FORM

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

Assignment: \_\_\_\_\_ Request Date: \_\_\_\_\_

Which category best describes your current tuition reimbursement situation?

\_\_\_\_\_ A1. **UP TO MASTER'S DEGREE**

- May only be graduate level or In-Service (Intermediate Unit) credits approved by PDE
- Maximum - 12 credits/year times average of PSU Berks and PASSHE graduate tuition rate

COLLEGE/UNIVERSITY: \_\_\_\_\_

\_\_\_\_\_ A2. **BEYOND MASTER'S/MASTER'S EQUIVALENCY**

- All graduate courses or approved undergraduate courses as directed by the Superintendent or graduate-level In-Service (Intermediate Unit) credits
- Maximum - 9 credits/year times average of PSU Berks and PASSHE graduate tuition rate

COLLEGE/UNIVERSITY: \_\_\_\_\_

\_\_\_\_\_ A3. **SABBATICAL LEAVE**

- Courses taken in this category will not count toward the credits listed in A2, A4, or A5
- Maximum - 18 credits/year times average of PSU Berks and PASSHE graduate tuition rate

COLLEGE/UNIVERSITY: \_\_\_\_\_

\_\_\_\_\_ A4. **DOCTORAL DEGREE PROGRAMS REQUIRING 12 OR MORE CREDITS/YEAR**

- Superintendent approval for any employee pursuing a degree beyond their Master's degree
- Degree programs must be relevant to the Employee's classroom assignment, area of certification, or be based upon district need
- Maximum - 12 credits/year times average of PSU Berks and PASSHE graduate tuition rate

COLLEGE/UNIVERSITY: \_\_\_\_\_

\_\_\_\_\_ A5. **ANOTHER AREA OF PUBLIC SCHOOL CERTIFICATION (beyond permanent certification)**

- Employees in this category must have prior approval of the Superintendent for this certification program. The basis of the approval will be the value of the certification area to the School District.
- Maximum - 12 credits/year times average of PSU Berks and PASSHE graduate tuition rate

COLLEGE/UNIVERSITY: \_\_\_\_\_

\_\_\_\_\_ A6. **DISTRICT SPONSORED COURSES**

- No maximum reimbursement

*Employees can take a maximum of four (4) "Third-Party" courses per contract. "Third-Party" is defined as a third party, non-degree granting organization offering graduate credits in conjunction with a regionally accredited institution. Any "Third-Party" courses taken prior to the beginning of this contract shall not be counted toward the 4 allowable courses.*

SESSION: Fall, 20\_\_\_\_ Spring, 20\_\_\_\_ Summer, 20\_\_\_\_ Other: \_\_\_\_\_

Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

**COURSE INFORMATION:**

Title of Course	Credits	Tuition Cost (Excluding any Fees)
_____	_____	_____
_____	_____	_____
_____	_____	_____

**After completion of the above course(s) I will have obtained \_\_\_\_\_ credits beyond the Master's/Bachelor's level.**

Courses for reimbursement must receive prior written approval from the superintendent and must be deemed to be of sufficient rigor to be reimbursable. In addition, appropriate supporting documentation (course description, etc.) must be either attached or placed on the back of this form. **After completion of the course, a receipt of payment, as well as a copy of the grade report, must be handed in to the attention of Tammy for reimbursement.**

Superintendent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that the above course(s) are reimbursable according to the provisions of the KASD-KATA collective bargaining agreement.

Professional Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Course Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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FOR OFFICE USE ONLY

Employee Name: \_\_\_\_\_ Assignment: \_\_\_\_\_  
Prior Credits Approved for Current Contract Year \_\_\_\_\_ Building/Grade: \_\_\_\_\_  
Receipt for Payment: \_\_\_\_\_ Grade Report: \_\_\_\_\_

Course Title(s):

\_\_\_\_\_ Credits  
x \$ \_\_\_\_\_

Fiscal Year for Reimbursement: \_\_\_\_\_ Total Amount to be Paid: \_\_\_\_\_

Date of Reimbursement: \_\_\_\_\_

Superintendent Signature: \_\_\_\_\_ Date: \_\_\_\_\_