

EAST AMWELL TOWNSHIP SCHOOL

REQUEST TO TAKE A COURSE OF STUDY

(Application to take a Course of Study as per Article XXII-B of the Teacher's Contract
Titled: Tuition and Fees)

Teacher's Name _____

College Teaching or Sponsoring the Course: _____

Location of Class _____

Course Number: _____ Course Name: _____

Starting Date: _____ Ending Date: _____

Day of Week and Time Course is Being Taught _____ Day _____ Time _____

Cost of Tuition Per Credit _____ Total _____

(Note: BOE pays ONLY tuition, not service charges, parking decals, library fees, course materials, etc.)

Please indicate your interest in taking this course and how it will help you professionally and the children you teach: (Be Specific.)

Signature of Teacher

Date Submitted

(NOTE: This form, along with a copy of the course description from the college catalog or brochure, must be submitted to the administration and receive approval from them prior to signing up for the course, if you plan to request BOE reimbursement for the course.)

Office Use Only

Date received by Administration: _____

Signature of Principal / Date

Signature of Superintendent / Date

Board Office Approval / Date