

BRIGHT LOCAL SCHOOLS
TUITION REIMBURSEMENT

Name _____ Date _____

Building _____

Current Teaching Assignment _____

Current Area(s) of Certification _____

Name of Course (including level and course number) _____

Location of Course _____

Date of Course (beginning and ending) _____

Anticipated Cost of Course (tuition only) _____

Description of Course and how it is related to your current assignment or area of certification _____

Approved by Superintendent _____

NOTE: Payment shall only be made after approval by the Superintendent, satisfactory completion of a course, and a copy of the grade slip or a transcript submitted to the Treasurer of the district prior to September 15.
