

Reimbursement Request for Certificated Stipend Program

School(s) Attended: _____

University of Alaska Sitka (online)

Dates Attended: May 14th - Aug. 6th 2018

Name of Course(s): _____

Intermediate Algebra MATH 105

	Hours	Semester / Quarter
	4	Credits

Reimbursement Costs:

Travel 0.00

Tuition 888.00

Special Fees 132.00

COLA _____ *

Total Amount Requested: \$ 940.00

* Check with district office for "dollar cost"

semester hours X dollar cost X 7 = COLA

Documentation Needed: Transcripts, grade report or letter from instructor verifying completion of course(s); plane/ferry ticket; copies of checks or receipts.

Stipend requests are to be presented to the chairman of the selection committee in your building by October 31st (for summer courses) OR May 15th (for school year courses). They in turn will handle the requests and submit to the district office. Requests will then go the School Board for approval.

I understand that reimbursement for all or part of the above educational plan obligates me to continue teaching in the Cordova School District for the school year 2018-19.

Signature _____

[Signature]

Date _____

10/29/2018

Chairman Signature _____

[Signature]

Member Signature _____

[Signature]

Member Signature _____

[Signature]

Date Signed by Selection Committee: _____

11-1-18

Refer to the current Negotiated Agreement for a full explanation of the Stipend Program.