Name: _____________________________ Employee ID#:___________________

Term: ______________ CCPS School/Location: __________________________

Teaching Assignment & Certificate Held: ________________________________

Teacher/Administrator Reimbursement Rate- $483 per credit hour
(max. $4347.00 per calendar year)

All classes must be pre-approved in order to receive direct bill payment.

I understand Cecil County Public Schools will preapprove tuition up to the allotted amount as indicated above. Should course work exceed the allowed amount, I understand I am responsible for the remaining balance. If my final course grade is not a “C” or better, I understand that I will be responsible for payment to the college or university and that no monies will be reimbursed to me from Cecil County Public Schools. I also understand I am responsible for the registration fees, books and any other charges incurred. I understand the college/university will provide my original grade report to Cecil County Public Schools.

Cecil County Public Schools tuition reimbursement cycle runs January 1 –December 31. **Benefits are calculated on a calendar year and reimbursements will be counted against the calendar year in which the school actually receives payment**

Course #, Name, & # of Credits:_________________________________________

Course #, Name, & # of Credits:_________________________________________

Student Signature: _____________________________ Date: _____________

Processed By: _____________________________ Date: _____________