

**LAKOTA LOCAL SCHOOL DISTRICT
APPLICATION FOR TUITION REIMBURSEMENT and/or SALARY UPGRADE**

ARTICLE 50 - TUITION REIMBURSEMENT

- A. The Board shall set aside a fund of Fifteen Thousand Dollars (\$15,000.00) each school year for tuition reimbursement, and shall reimburse each employee by October 31 up to seventy-five percent (75%) of the cost of tuition and fees for graduate coursework completed and earned each preceding fiscal year (July 1 – June 30).
- B. Payment will be made upon evidence that the coursework has been satisfactorily completed. A copy of the receipts and an official transcript needs to be received by the Treasurer by September 30. A maximum of nine (9) semester hours (or equivalent quarter hours) may be reimbursed during a school year. In the event applications for reimbursements exceed the fund, distributions shall be made on a pro rata basis.
- C. Fund balances shall not be carried over into subsequent years. **Employees must apply by September 30 to be eligible for reimbursement under this Article.** Employees will only be reimbursed if they are currently employed by the Board.

ARTICLE 40 - COLLEGE CREDIT RECOGNITION

Verification of college training and proper certification/licensure must be filed with the Treasurer of the Board by September 30 for movement on the salary schedule for the first semester and by January 31 for the second semester. An official transcript of the above coursework must be filed with the Treasurer by October 31 and February 28 for the first and second semesters respectively. All credit must be from an institution whose courses are accepted by the Division of Certification, Ohio Department of Education for the purposes of recertification or any other course pre-approved by the Superintendent.

Name: _____ Applying for: Tuition Reimbursement Salary Upgrade Both

College/University/Organization: _____ Today's Date: _____

1. Course and Program: _____ Your Cost \$ _____ Dates: _____ Hours: _____ Qtr Sem

2. Course and Program: _____ Your Cost \$ _____ Dates: _____ Hours: _____ Qtr Sem

3. Course and Program: _____ Your Cost \$ _____ Dates: _____ Hours: _____ Qtr Sem

For Treasurer's Office Use

• Today's Date: _____ Attached: Original Transcript Evidence of Payment

• **SALARY UPGRADE:** **TUITION REIMBURSEMENT:**

Current Status: _____ 1. Cost \$ _____ Reimbursement \$ _____

Awarded: _____ 2. Cost \$ _____ Reimbursement \$ _____

Upgraded to: _____ 3. Cost \$ _____ Reimbursement \$ _____