

Northwest Ohio Educational Service Center
**APPLICATION FOR APPROVAL OF COURSEWORK
TO BE TAKEN FOR REIMBURSEMENT**

APPLICATION

SUBMIT COMPLETED FORMS TO THE SUPERINTENDENT
PRIOR TO THE START OF THE COURSE

NAME: _____ Last 4 digits of SS#: _____

HOME STREET ADDRESS: _____

CITY/STATE/ZIP: _____

POSITION WITH NwoESC: _____

Are you employed by NwoESC under a supplemental or alternative license? Check the box that applies: Yes No

I am making application for reimbursement of the following college coursework expenses:

COURSEWORK NUMBER: _____ (only 1 course per application form)

COURSEWORK TITLE: _____

COLLEGE/UNIVERSITY: _____

Check one: Semester Hours # of hours earned through this course will be: _____
 Quarter Hours # of hours earned through this course will be: _____

TUITION COST/HOUR: _____

COURSE START DATE: _____ COURSE ENDING DATE: _____

Employee's Signature _____ Date _____

If this request is approved, additional paperwork will be required upon completion of the coursework for payment to be processed.
****PAYMENTS FOR COURSEWORK ARE MADE TO CURRENT EMPLOYEES IN OCTOBER OF EACH YEAR.****
Please refer to your staff handbook for additional information on the guidelines for tuition reimbursement through the NwoESC.
A copy of this application will be returned to you after action is taken by the superintendent.

*****OFFICE USE*****

Request Approved Remarks: _____
 Request Denied _____

Superintendent's Signature _____ Date _____