



**PROFESSIONAL GROWTH REQUEST
for Tuition Reimbursement and/or
Credit for Advancement on Licensed Salary Schedule**

- Approval Process:
1. Must be submitted at least 10 days prior to the 1st day of class/coursework. .
 2. Fill out form and describe course or attach description if appropriate.
 3. Secure your immediate supervisor's approval. Be prepared to discuss with your supervisor.
 4. Secure Department Director administrative approval.
 5. Send to Human Resources Director for ESD Approval.
 6. A signed copy returned to the employee.

Date of Request: _____ **Name:** _____

Current Assignment: _____ **Supervisor's Name** _____

I. Please indicate quarter/month/date of intended coursework (e.g., Fall Nov. 2018):

Fall _____ Winter _____ Spring _____ Summer _____

II. Tuition Reimbursement requested: YES _____ NO _____ AMOUNT _____

Approval may be granted on all coursework that, in the opinion of the Superintendent, reflect a substantial benefit to the ESD as determined solely by the District, and fall within the resources budgeted for that purpose by the District. Staff will be reimbursed for 75% of the cost of tuition for course work, not to exceed the average per unit cost of the Oregon State System of Higher Education. Remuneration of tuition will be paid upon evidence of successful completion.

Employee must send proof of payment and grade record or certificates of professional development hours after completion along with a copy of this form to HR Department for reimbursement of tuition costs. Reimbursement does not include payment for books or other course materials.

III. Credit for Advancement on the Licensed Salary Schedule requested: YES _____ NO _____

For (PLEASE CHECK ONLY ONE) In-District Credit _____ University Credit _____

- In-district credit may be awarded to employees for approved Professional Development hours completed outside the contract day (after work, Saturdays', etc.) and for which the licensed employee is not paid by the district. Proof of Professional Development hours awarded and that coursework was taken outside of the workday for which you are paid must be submitted. Professional Development hours are translated to in-district credit on a 10 to 1 ratio – 1 credit for every 10 hours of instruction.
- University credit: One semester credit equals 1.5 quarter credits. An official transcript is required for advancement on the salary schedule.
- All references to credit on the salary schedule are quarter credits.

IV. Course Description (Note: Credit for licensed personnel must be Graduate Level Courses – 500 Level and above)

Course No.	College/University/or Organization	Course Name	Hours (credit/PD hours)	Cost
Working Toward (Please Check) BA+15___ BA+30___ BA+45___ MA___ MA+15___ MA+30___ MA+45___				

V. Description of how this course/workshop directly relates to your professional development goals:

APPROVED	DISAPPROVED	Supervisor's Signature	Date
APPROVED	DISAPPROVED	Department Director's Signature	Date
APPROVED	DISAPPROVED	Human Resources Director	Date

Reason for Disapproval or Note:

For Official Use Only

Copy returned to employee _____ Encumbered \$ _____ Payment Approved \$ _____ Initial _____