

**Dover-Sherborn Public Schools Professional Development and Education Improvement
Approval and Reimbursement Form Directions:**

1. Please read Article 29 in the Teacher's Agreement before completing this form.
2. Please complete Parts I and II or Parts I and III before submitting this form.

*******PART I*******

Name: _____ Date: _____

School: _____

Home/Mailing Address: Street:

City: _____, State: _____, Zip Code: _____

Present Degree Level: ___ Bachelor's ___ Bachelor's +15 ___ Master's ___ Master's +15
___ Master's +30 ___ Master's +45 ___ Master's +60 ___ CAGS ___ Doctorate Course

Title: _____

Institution: _____ # of Graduate Credits*: _____

Tuition: \$_____ Start Date of Course/Conference: _____ Please
specify a **goal (individual, school, department/team/grade, district)** associated with this
particular course:

Final Version Approved and Adopted 9/10/2009 * Graduate Credits: Teachers should carefully review the graduate credit(s) granted for satisfactory completion of the course, making sure that the number of credits, as advertised, will appear on a final transcript (as opposed to a grade report). Be sure to submit any conversion or correlation table(s) pertaining to the credits that the sponsoring institution provides.

*******PART II*******

Complete Part II (and Part I) if you are taking the course for graduate credit beyond M60 or PDPs and reimbursement*, but not for possible lane change/salary adjustment consideration. **(See Part III for directions pertaining to lane change/salary adjustment consideration).**

Are you taking this course for: Graduate credit(s) beyond M60 and reimbursement, but not for possible lane change? _____
PDPs and reimbursement, but not for possible lane change? _____

Write a brief statement giving your reasons for taking this course:

Submit this form to your building administrator and DSEA representative.

Building Administrator/ Date _____ A or D

DSEA representative/ Date _____ A or D

** Requests denied at first level should be forwarded to Superintendent and DSEA President.**

President DSEA /Date _____ A or D

Superintendent /Date _____ A or D

Note: In order to be reimbursed for this course/conference, submit the following documents to the Office of the Superintendent before January 1st June 1st of the current fiscal year: One copy of this signed form; One (1) copy of a cancelled check or a copy of the credit card statement on which the course charge appears; and One (1) copy of a grade report from the sponsoring institution. (If a grade report is not furnished by the sponsoring institution, evidence of satisfactory course completion/participation must be provided.) 2 * Reimbursement. Teachers are only guaranteed \$400 per year for course reimbursement. *

*******PART III*******

Complete Part III (and Part I) if you are taking the course for graduate credit, reimbursement*, and lane change/salary adjustment consideration. As Part III is being completed for possible

salary adjustment, this form needs to be approved by the Superintendent. First submit this form to your principal/headmaster and DSEA representative and then to the Superintendent, together with a course description, for approval. If the course description is insufficient, you may be asked to furnish a course syllabus. Upon completion of this course, a grade report must be submitted. An original transcript must be provided at the time of the lane change/salary adjustment request. Write a brief statement giving your reasons for taking this course:

Submit this form to your building administrator, DSEA representative, and to the

Superintendent/Assistant Superintendent/ Date: _____ A or D

Building Administrator/ Date: _____ A or D

DSEA representative/ Date: _____ A or D

Note: In order to be reimbursed for this course/conference, submit the following documents to the Office of the Superintendent before January 1st or June 1st of the current fiscal year:

One (1) copy of this signed form;

One (1) copy of a cancelled check or a copy of the credit card statement on which the course charge appears; and

One (1) copy of a grade report from the sponsoring institution. (If a grade report is not furnished by the sponsoring institution, evidence of satisfactory course completion/participation must be provided.) * Reimbursement. Teachers are only guaranteed \$400 per year for course reimbursement.

3 For Office Use Only ____ B. Sears (copy) ____ C. Ingersoll (original)