

**APPENDIX E**

**TUITION REIMBURSEMENT AND/OR COLUMN ADVANCEMENT**

Dear Colleague:

Please complete this form and return it to the office of the Superintendent when you complete your coursework.

In order to insure your timely receipt of additional monies or column advancement, it will be necessary to have the information prior to September 15 in the year which salary adjustment occurs.

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**NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_

Course/s Completed

Hours Completed

Name of Institution/s

Transcript or letter from college indicating course/s completed

Y \_\_\_\_\_ N \_\_\_\_\_

Are you eligible for column advancement?

Y \_\_\_\_\_ N \_\_\_\_\_