MUNDELEIN HIGH SCHOOL
COURSE/CREDIT REIMBURSEMENT REQUEST

NAME _____   DATE _____

DEPARTMENT _____

INSTRUCTIONS

1. Please complete this form and attach verification that the course is
   a. offered for graduate credit
   b. offered for a grade (not Pass/Fail)
   c. offered with a transcript upon completion from an accredited college or university
2. Please return this form to the Business Office *prior to enrollment in the class*

Name of Course: _____

Course #: _____   Online course: yes _____   no _____

College/University: _____

Number of: Semester Hours _____   Quarter Hours _____
Tuition Per: Semester Hour _____   Quarter Hours _____

Course to be taken: Fall 20_____   Spring 20_____

                                   Winter 20_____   Summer 20_____

Reason for taking course_____

_____   _____
Certified Staff Member   **Department Chairperson**

ADMINISTRATIVE APPROVAL

1. *ELIGIBLE FOR TUITION REIMBURSEMENT*   YES _____   NO _____
2. *CREDITS ELIGIBLE TO BE COUNTED ON SALARY SCHEDULE*   YES _____   NO _____

_____
Principal   *date*

BUSINESS OFFICE USE ONLY

UPON ADMINISTRATIVE APPROVAL: *Course approved to reimburse _____ hours @ $_____/hour = $_____*
                                                   (12 credits annual maximum)

UPON COMPLETION OF COURSE:

1. *TRANSCRIPTS RECEIVED*   _____
2. *TUITION REIMBURSED*   _____
3. *COUNTED ON SALARY SCHEDULE*   _____
4. *ACTIVATES LANE CHANGE FROM _____ TO _____ EFFECTIVE_____*