

Monroe Township Public Schools
Pre-Registration for Educational Assistance Benefit Determination Form
Pre-Approval is required by the Superintendent of Schools

Name: Kevin Higgins Signature [Signature]

15-2781

Date: 12/18/13

Current School/Grade/Subject/Assignment: MTHS Asst. Principal

Name of College or University: Lewman University

Courses (course numbers must be listed):

Graduate	Undergraduate *	Title of Course(s)	Date(s) of Courses	Credits
# EDST 24.795	#	Dissertation Research	1/2014-5/2014	6
#	#			
#	#			

Credits 5 of 6

*Only eligible non-certificated staff members may take undergraduate courses

☐ yes ☒ no Is this course(s) needed to maintain present certification?
☒ yes ☐ no Is this course(s) being taken at an accredited college/university?
☒ yes ☐ no Is the course(s) a graduate level course?
☒ yes ☐ no Does the coursework count toward the teacher's PIP / 100 hours?

A/P PAYS
 1/cac @ \$662
 \$662

APPROVED

☒ Yes, provided you haven't reached the maximum yearly allowance
☐ No.

[Signature]
 Signature of Superintendent or Superintendent's Designee

12/20/13
 Date

REQUEST FOR EDUCATIONAL REIMBURSEMENT

Please return the approved original requires, with official college transcripts and proof of payment.

Course	#1 EDST 24795	#2	#3	Total
Tuition	\$ 840.00	\$	\$	\$
Grade Received	PAS			
			Grand Total	\$ 840.00

[Signature]
 Signature of Administrator

9/11/14
 Date

[Signature]
 Superintendent Approval & Date

9/15/14
 Date

TUITION REIMBURSEMENT
 POSTED 10-7-14
 A/P PAYS \$662-
 PAYROLL PAYS
 Original in Payroll-Copy in A/P

Transcripts Reviewed
 Courses Verified
 Signature _____

Monroe Township Public Schools

Pre-Registration for Educational Assistance Benefit Determination Form

Pre-Approval is required by the Superintendent of Schools

Name: Kevin Higgins

Signature

15-4630

Date: 12/18/13

Current School/Grade/Subject/Assignment: MTHS Asst. Principal

Name of College or University: Rowan University

Courses (course numbers must be listed):

Graduate	Undergraduate *	Title of Course(s)	Date(s) of Courses	Credits
# EDST 24.795	#	Dissertation Research	1/2014-5/2014	6
#	#			
#	#			

credit
6 of 6

*Only eligible non-certificated staff members may take undergraduate courses

☒ yes ☒ no Is this course(s) needed to maintain present certification?
☒ yes ☐ no Is this course(s) being taken at an accredited college/university?
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A/P Pays
\$662

APPROVED

☒ Yes, provided you haven't reached the maximum yearly allowance

☐ No.

Signature of Superintendent or Superintendent's Designee

Date

REQUEST FOR EDUCATIONAL REIMBURSEMENT

Please return the approved original requires, with official college transcripts and proof of payment.

Course	#1 24795	#2	#3	Total
Tuition	\$ 848.00	\$	\$	\$ 848.00
Grade Received	PASS			
			Grand Total	\$ 848.00

Signature of Administrator

Date

Superintendent Approval & Date

Date

☐ Transcripts Reviewed
☐ Courses Verified

Signature

TUITION REIMBURSEMENT

POSTED 2-26-15

A/P PAYS \$662

PAYROLL PAYS

Original in Payroll - Copy in A/P