## SANDWICH PUBLIC SCHOOLS GRADUATE COURSE REQUEST APPROVAL FORM

(Approval needed PRIOR to starting course) Attach syllabus/course description when possible.

Name:	Date:					
Middle-High School Oak Ridge Forestdale		Current F	Irrent Position:			
Graduate Level Course: Yes	_No	Degree Program or Lice	ensure? YesNo			
Number of Credits*:	nber of Credits*: Expected Year of C		letion:			
Title of Course:						
		Cost of Course: \$				
Reason for Taking Course:						
Content Development	District Focus: Differentiation		SEI Endorsement			
Instructional Practices	District Focus: Social Emotional Learning		Other - Please write in			

**REQUIRED PAPERWORK FOR REIMBURSEMENT:** 

- Completed Reimbursement for Completed Graduate Course Form; and
- Copy of signed Course Request Approval Form; and
- Grade Report or Transcript (original transcript required for a lateral move); and
- Receipt from the institution showing course name, total fee for course, & amount paid by you.

## Plus, AT LEAST ONE of the following:

- Credit/Debit card statement showing your name and last 4 digits of account number; or
- Copy of the credit/debit card used for payment with name and last 4 digits of account number visible; or
- Cancelled check (front and back), if not paid with credit or debit card.

ADMINISTRATOR	<u>SIGNATURE</u>	A <u>PPROVED</u>	NOT APPROVED	DATE
Asst. Superintendent:				
Superintendent:				

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Office use only:

\_ Emailed signed copy

NOTES below