

Wareham Public Schools
Wareham, Massachusetts

Application for Course Reimbursement

Please Print

1. Employee's Name	School/Dept.
2. Name of the Course	
3. Name of the Institution where credits were earned:	
4. Have you filed requesting Superintendent's approval for this course?	
5. Evidence of satisfactory completion of the required courses must be presented to the Superintendent within sixty (60) days of course completion in order to receive reimbursement. Reimbursement can not be processed without: 1. Copy of Transcript/Grade Report; 2. Proof of Payment (Copy of canceled check, statement from college or credit card statement); and 3. Copy of your relevant Course Approval form.	
Amount requested:	

Employee's Signature: _____

Date: _____

Office use only:
Vendor # _____

Account # 001-12-07-08-2350-06-0001

Comment: Courses completed _____