UNIQUE NEED TUITION REIMBURSEMENT FORM

Please complete this form for requ	uests for tuition bey	ond the WCEA entitlement	as specified in the n	egotiated contract between	en
the Warren County Education Ass	sociation and Warre	n County School District:	"Reimbursement wi	II be made for courses	
taken to meet a new or unique nee					
WCSD Negotiations Agreement		•			
	α			5	

webb regonations Agreement					
Name: Shelly R, Sta	ewart	D	ate: <u>A-9-08</u>	3	
Assignment/Grade Level: Reac	ting Specia	alist		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
School: WCCC, RES, EMI	HS Years Service in V	Varren County Scho	ool District as Teacher:	3	
Please describe the unique need of the W	/arren County School E	District that would b	e met by this request: <u>V</u>	Varcen	
County School Dis	strict is e	experier	icing a s	hortage	
of administr	rators a	S Der H	he Websit	Co.	
Certification/Degree that will be carned:	Principal (Certifical	tion		
College/University: Gannor	, ,				
Advisor/Dean's Signature:		\supset	elephone Number:		
List all courses for which tuition reimbur					
— Course	Course Number	No. of Credits	Data of Course	Cost of Tubbe	7
n - Supervision +	70	nuls of Credits	Date of Course	Cost of Tuition	1345 .00
GEDU EValuation Principal as Instructional	7al	3	10-27-08 - 12-15-08 Fall	1365,00	7000 100
School Finance Management		3	8-25-08-10-13-05 Spring		-
Legal Aspects of Educational		3	1-12-05-3-8-08 Spring 3-29-08-5-19-08	1365.00	_
LEGUI POPECBUA Administrat	rates 100		Summer	1365.00	**************************************
Computer Applications asminist	124 .	3	5-31-0x-7-36-03	1365.00	
Practicum I	<u> 726 · </u>	<u> </u>	10-27-08 - 12-15-08 Fall	455,00	
Practicum II	727 128	1	1-12-08-3-8-08	455,00	The CITY
Practicum III Date that Certification/Degree will be aw	varded: <u>augu</u>	ut 2008	> 3-29-08-3-17-	08 SPM5 45	5.00
I have read the above information and ag	ree that it is correct:	/ .			
University Advisor's Signature:	athlew K	encolon	Date Z	-20-0	25
Advisor's Telephone Number:	14) 871-56a	16			
I agree to all the conditions of tuition rein and understand that I have no entitlement	nbursement as stated ir t to a position transfer b	the WCEA/Board by completion of the	Agreement or Act 93 /Bo ese courses.	oard Agreement	
Requestor's Signature:	R. Ster)art	Date: 6	7-9-08	
	<u> </u>				
L. English Rev. 7/07	- · v /			1365	

I have reviewed the above in request as meeting a unique r	formation f seed of the	for uniqu Warren	ue need County	tuition reimburse School District	ement. As thank	he requestor's supe the requestor's par	rvisor, I recognize thi rticipation in this	S
program by my signature bel	ow.				•			
	_		\sim	_				

Supervisor's Signature:

Storah Grapes Principal

As superintendent of the Warren County School District, I recognize this request as meeting a unique need of the Warren County School District and approve the request for tuition reimbursement and the requestor's participation in this program by my signature below.

Superintendent's Signature:

Date: 2 - 28 - 08

WARREN COUNTY SCHOOL DISTRICT PROJECTED CERTIFICATION NEEDS

Foreign Languages

Spanish French

German

Science Physics

Chemistry

School Administration

Reading Specialist

Special Education

Autism

Physically Handicapped

Emotional Support

Life Skills

Consumer Science

Technology Education

School Counselor

Educational Technology Integration

Librarian

Additions to Special Education Certificates

Mathematics

Social Studies

Science

Middle Level Certificates

Masters Degrees in the Content Area

Advanced Placement Course Training

Speech Pathology