## LAMAR R-1 SCHOOL DISTRICT

\*Application for **Incentive Reimbursement** for additional college hours

DATE:			
NAME OF TEACHER TO BE I	REIMBURSED:		
COLLEGE:		•	
EIGHTY DOLLARS \$80 PER	CREDIT HOUR		
SESSION SUMMER:	FALL:	SPRING:	
COURSE AND NUMBER:			
NUMBER	NAME	·	CREDITS
		TOTAL CREDIT I	IOURS
Prior application and approval by	the Principal and Superint	endent of Schools mus	t be made and
received for each course taken to	be eligible for reimbursem	ent.	
Reimbursement will be made in S	September of each year. V	erification showing the	above completed
courses must be on file in the Sup	perintendent's office by Sep	otember 1 <sup>st</sup> for reimbur	sement to be made.
Teacher's Signature		Principal's	Signature
Approved By:			
Super	intendent		