Windham Central Supervisory Union
wcsu46.org
1219 Vermont Route 30 Townshend, VT 05353
802-365-9510 phone ◊ 802-365-7934 fax

WCSU will provide member districts with the leadership and resources to ensure a strong education system for all students.

APPROVAL FOR CREDIT AND/OR REIMBURSEMENT – JAMAICA

Professional Development Request for Employees subject to the negotiated agreement between the WCEA and the Jamaica Board of School Directors

NAME: _____ SCHOOL: _____ FTE: _____ DATE: _____

COURSE TITLE: _____

Please check one: ☐ GRADUATE CREDIT ☐ UNDERGRADUATE ☐ WORKSHOP

COLLEGE CREDIT HOURS FOR ADVANCEMENT ON SALARY SCALE: _____

COST OF COURSE: $_____ ***Payroll – Please check one:*** 22 Pay Periods_____ 26 Pay Periods _____

PLEASE NOTE: You must provide the Superintendent with a transcript or certificate of attendance and invoice and/or registration form from institution sponsoring professional development opportunity, within 30 days of completion of the course or workshop. Failure to do so will require your reimbursement of the advanced payment to the district, either by a check or payroll deduction.

INCLUSIVE DATES OF COURSE: _____

COLLEGE OR SPONSOR OF COURSE: _____

LOCATION OF COURSE: _____

IPDP GOAL: _____

SUPPORTS MY SCHOOL'S ACTION PLAN ☐ YES ☐ NO PAY FROM BUDGET CODE # _____

APPROVED BY PRINCIPAL: _____ DATE: _____

COPY OF STANDARD'S BOARD APPROVED IPDP: _____ DATE RECEIVED BY WCSU: _____

DATE DELAYED BILLING REQUESTED _____ DATE APPROVED _____ ☐ YES ☐ NO

DATE ADVANCE PAYMENT REQUESTED _____ ☐ YES ☐ NO ☐ ALREADY PAID-REIMBURSE TEACHER

PLEASE NOTE: This section to be completed by the Superintendent of Schools prior to the start date of the Course.

MAXIMUM REIMBURSEMENT AVAILABLE: (for FTE 1.0 employee $1,464) $1,464 X FTE = $ _____
CURRENT REIMBURSEMENT AMOUNT APPROVED: $_____
PRIOR YEAR-TO-DATE REQUESTS: $ _____
REMAINING PROFESSIONAL DEVELOPMENT FUNDS AVAILABLE AS OF: _____ $ _____
Date

CREDIT HRS. APPROVED FOR SALARY ADVANCEMENT: ____

PLEASE NOTE: Employer Paid Advance requires 26 pay period payment option.

_____ _____
Superintendent of Schools Date

FOR OFFICE USE: DATE PROOF OF GRADE/COMPLETION PROVIDED: _____
AMOUNT PREPAID: $_____
AUDIT OF ACTUAL COSTS (Itemize) $_____
BALANCE DUE TO/FROM EMPLOYEE $ _____

WCSU will …place students at the center of our decision-making.
…build trust and respect by acting ethically, transparently, and with integrity.
…operate as a community of learners, committed to developing the skills and capabilities of all.
…collaborate, share and seek creative solutions.