FRANKLIN BOROUGH SCHOOL
GRADUATE COURSE REIMBURSEMENT FORM
FY _____

If you have received prior approval, please complete sections 1, 2, 3, 12, 13*

1 **TEACHER:**	2 **DATE:**
3 **COURSE:** **TITLE:** **COURSE NO.:**	
4 **GRADE LEVEL/AREA EMPLOYED:**	5 **AREA OF CERTIF:**
6 **TOTAL CREDITS OBTAINED DURING THIS CURRENT SCHOOL YEAR (JULY 1-JUNE 30) IN THE FOLLOWING CATEGORIES:** *(Excluding this course)* Within Field/Area (12 allowed per year) _____ Outside Field/Area (3 allowed per year) _____	
7 **INSTITUTION:**	8 **SEMESTER:**
9 **DO YOU BELIEVE THIS COURSE IS** ☐ Within Field/Area ☐ Outside Field/Area	10 **CREDITS FOR THIS COURSE:** _____ **PRESENT STEP ON GUIDE:**_____
11 **BRIEF DESCRIPTION OF COURSE (or attach course description):**	
12 COST FOR REIMBURSEMENT:	$_____ (Please attach itemized bill)
13 **PLEASE SUBMIT TRANSCRIPT INDICATING PASSING GRADE**	
For Office Use Only: ☐ Prior Approval ☐ Reimbursement Granted (pursuant to contract) Comment: _____ _____ **Superintendent's Signature** Date	