

Marysville Public Schools Teacher Tuition Reimbursement Form

Please review Article XIX, Teacher Compensation, Paragraph I, of the Master Agreement between the Marysville Public Schools District and the St. Clair County Educational Association, MEA/NEA to determine your eligibility for tuition reimbursement.

If you feel you qualify for this reimbursement, please complete the following information and attach the required documentation.

1. Your hire date (month and year): _____
2. Name of degree-granting institution: _____
3. Attached documentation of approved degree program: Yes ___ No ___
4. Attached documentation of successful completion of courses to be reimbursed (transcripts, grade reports, etc.): Yes ___ No ___
5. Attached copies of paid tuition receipts including institution name, date and amount: Yes ___ No ___
6. Date submitted for reimbursement: _____
7. Name: _____ Building: _____
8. Signature: _____

Please submit this form with attachments to the Personnel Office.

For Office Use Only

Date Received: _____

Approval to Pay: \$ _____

By: _____ Date: _____

Date Sent to Bus. Office: _____ Date Paid: _____