

Cambridge Public Schools
CTA UNIT E (Paraprofessional)
Tuition Reimbursement Program Application Form

Application Deadlines

Fall semester: September 30
Spring semester: January 30
Summer semester: June 10

Instructions: Complete the information below in Section A, attach a copy of the published course description, obtain the written pre-approval of your Principal or supervising Coordinator/Director in Section B of this form, and then submit form to the Office of Human Resources, 159 Thorndike St., Cambridge, MA 02141 by the appropriate deadline stated above. It is the applicant's responsibility to ensure that this application is completed and submitted. It is strongly recommended that the application be submitted to Human Resources before the course start date to determine whether funding is available.

Reimbursement Limitations: Paraprofessionals are eligible for reimbursement of *tuition costs only*. Maximum reimbursement is \$500 per individual per year. Approved college/university courses must be completed with a grade of B- or better. Tuition reimbursement is *not* granted for courses/programs taken during regularly scheduled work hours, nor for fees and expenses such as application fees, pre-application registration fees, transcript fees, test preparation or test fees, admission testing fees, placement fees, book costs, travel cost, parking fees, tutoring fees, equipment/kit purchase costs, course addition/deletion/transfer fees, student activity fees, student union fees, recreation fees, health coverage costs, dissertation or typing fees, alumni fees, and other similar fees or costs.

To Obtain Reimbursement: To receive tuition reimbursement payment for pre-approved courses, within 60 days of completion of course or seminar, the teacher must submit (1) a completed "Tuition Reimbursement Program – Reimbursement Form"; (2) copy of course grade report (official transcript); (3) copy of tuition invoice, and (4) copy of paid tuition receipt to the Financial Operations Office, 159 Thorndike Street.

SECTION A: To Be Completed by Paraprofessional

Note: All sections must be completed. Do not enter "see attached" for any items. A published course description must be attached.

Teacher's Name: _____ Date: _____

Title: _____ School/Department _____

Name of College /University: _____

Course Title: _____

Number of Credits: _____ Date Course Begins: _____ Date Course Ends: _____

Tuition Cost: _____ Amount of Reimbursement Requested: _____

Relevance to Your Position/Professional Development: _____

SECTION B: PRINCIPAL or COORDINATOR/DIRECTOR PRE-APPROVAL

Administrator's Signature: _____ Title: _____

Date Reviewed: _____

Meets Eligibility Criteria: Yes ____ No ____

Pre-Approval Granted: Yes ____ No ____

(If no, please specify reason):

SUBMIT FORM TO: This completed application must be submitted to the Office of Human Resources, 159 Thorndike St., Cambridge, MA 02141 prior to the appropriate application deadline noted above. It is the applicant's responsibility to ensure this application is received.