



CORRY AREA SCHOOL DISTRICT

College Course Pre-Approval Form

DIRECTIONS: Complete all information requested below and have your Bldg. Principal or Supervisor/Director sign this form. The form will then be sent on for final approval to the Assistant Superintendent. You will receive a copy back when your course has been approved.

IMPORTANT NOTE: It is required that this form be submitted for District approval in advance of course registration. Registrations that take place prior to preapproval by the District **will not** be processed and it will be the sole responsibility of the employee for all applicable costs to the university for which he/she has elected to register without formal approval by the District. In addition, it is important to note that **a separate Course Pre-Approval Form MUST be completed for each course.**

PERSONAL INFORMATION

Name: _____ Date: _____ Building: _____

COURSE INFORMATION

College/University: _____ (A separate Course Pre-Approval Form **MUST** be completed for each Course.)

Course Title: _____ Course Code: _____

Course Dates: Start Date: _____ Ending Date: _____

Graduate Course Undergraduate Course

Tuition Reimbursement Rate is set at Edinboro 's rate at the time the course is taken.

Credit Per Course _____ Cost Per Credit _____ Total Cost _____

Course Description (brief catalog description): _____

Purpose for taking college course:

Working on Level II Credits Working on Master's Degree (Attach Plan of Study)

INSTRUCTIONAL II ONLY

A plan of study must be filled out, signed and attached to this pre-approval form for post secondary graduate level Courses beyond 6 credits.

(As per Collective Bargaining Agreement Pg. 7 Sec. F #7)

College Tuition Deferment Agreement For: Edinboro Gannon Other _____

(Attach the College Tuition Deferment Form to be Signed by the Assistant Superintendent)

Make sure all of the following have been completed: **When Course is Complete Send The Following To Central:**

- | | |
|--|--|
| <input type="checkbox"/> Fill In All Personal Information | <input type="checkbox"/> Fill out a Tuition Reimbursement Form |
| <input type="checkbox"/> Attach Signed Plan of Study (Instruction II Only) | <input type="checkbox"/> Send a copy of your grades |
| <input type="checkbox"/> Attach College Tuition Deferment Form (if needed) | <input type="checkbox"/> Send a copy of your College Invoice |
| <input type="checkbox"/> Attach the Goal/Needs from Act 48 Plan | |

Approved/Denied

Signature of Director/Supervisor _____ Date _____

Signature of Bldg. Principal _____ Date _____

Signature of Asst. Superintendent _____ Date _____

Signature of Superintendent _____ Date _____

Central Use ONLY
_____ Rec'd Form
_____ Copy to Employee