

**PRE-APPROVAL REQUEST  
FOR  
COLLEGE CREDIT TUITION REIMBURSEMENT**

NAME \_\_\_\_\_ BUILDING \_\_\_\_\_

DATE OF REQUEST \_\_\_\_\_

<u>Course Title</u>	<u>Course Number</u>	<u>No. of Sem./Qtr. Hrs.</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Cumulative total number of hrs. requested during current school year* \_\_\_\_\_

NAME OF COLLEGE OR UNIVERSITY \_\_\_\_\_

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\_\_\_\_\_  
Approval Date

\_\_\_\_\_  
Superintendent's Signature

**SUBMIT THIS FORM TO BUILDING PRINCIPAL**