

Buckeye Local School District
Reimbursement of Graduate Studies and/or Licensure Renewal

Name: _____

Address: _____

Present Assignment: School: _____ Position: _____

Graduate Studies:

College or University: _____

Start Date: _____ End Date: _____

Graduate Course

Credit Hours

Cost

Payments shall be made in accordance with Article XVII, Section 17.02 of the Negotiated Agreement.
Request for payment must include grades and verification of payment.

Reimbursement of One License \$ _____ (Once Every Five Years Effective September 1, 2024)

Payments shall be made in accordance with Article XVII, Section 17.02 of the Negotiated Agreement
starting September 1, 2024. Payment shall be made quarterly March 31, June 30, September 30, and
December 31. Maximum combined reimbursement per year \$700.00 (September 1 through August 31)

Do Not Write Below Line:

Coursework was satisfactorily completed and in alignment with current IPDP. ☐ Yes ☐ No

Graduate Course Reimbursement \$ _____

License Reimbursement \$ _____

Total Reimbursement \$ _____

Superintendent

Date

Received By _____

☐ Approved

☐ Denied

Date Received _____