

Gardner-South Wilmington High School District #73

**Request for Reimbursement of College Credit**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

University \_\_\_\_\_

Dept.: \_\_\_\_\_ Semester Hours: \_\_\_\_\_

Course: \_\_\_\_\_ Grade: \_\_\_\_\_

Course: \_\_\_\_\_ Grade: \_\_\_\_\_

Course: \_\_\_\_\_ Grade: \_\_\_\_\_

Course: \_\_\_\_\_ Grade: \_\_\_\_\_

Date Course(s) will be taken: \_\_\_\_\_

A transcript from the University is required before reimbursement is made. Please keep a copy for your own file.

College credit for graduate courses approved by the Superintendent will be reimbursed according to the teacher's contract.