



District School Board of Pasco County SRP to Teacher Program Financial Assistance Request

The District School Board of Pasco County is committed to assisting School Related Personnel in achieving their educational goals to become teachers. Financial awards will be based on availability of funds and employee's compliance with the conditions stated below.

Please type or print the following requested information. Requests for financial assistance are not guaranteed.

LAST NAME	FIRST NAME	MI
EMPLOYEE ID NUMBER	CURRENT POSITION	SCHOOL
PHONE EXTENSION		
NUMBER OF YEARS EMPLOYED WITH DISTRICT SCHOOL BOARD OF PASCO COUNTY	SUPERVISOR	HOME PHONE/ CELL PHONE

Reimbursement Guidelines: Tuition and Books

- Must be employed with the District School Board of Pasco County for at least one calendar year.
- Two college courses (maximum of 6 credit hours) per term are eligible for reimbursement.
- Course work is degree seeking in the area of education or a prerequisite to education courses.
- Must attain a minimum of a "C" for each course.
- A grade report/transcript must be submitted for the semester for which you have applied for assistance.
- Tuition Reimbursement: An itemized financial summary must be submitted for reimbursement.
- Book Reimbursement: An itemized receipt must be submitted for reimbursement, along with a copy of each course syllabus.
- Reimbursement for tuition is based upon the current state tuition rate.
- Upon completion of degree/credential, our expectation is that you teach in Pasco County schools for a minimum of two (2) years if offered employment.

College and Course Information

TERM/SEMESTER & YEAR	COLLEGE/UNIVERSITY	DEGREE MAJOR
COURSE CODE #	COURSE NAME	# OF CREDITS
COURSE CODE #	COURSE NAME	# OF CREDITS
ANTICIPATED GRADUATION DATE	ANTICIPATED CERTIFICATION AREA UPON GRADUATION	TOTAL CREDITS TOWARDS DEGREE

Other Funding/Grant Sources

Please disclose additional funding sources and amounts you have received or for which you have applied. If the amount of grants exceeds fees, you are not eligible for reimbursement.

FUNDING SOURCE(S)	AMOUNT
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Reimbursement Request

Please include an itemized financial summary and book receipt. Credit card statements are not acceptable.	TUITION TOTAL \$	BOOK(S) TOTAL \$	TOTAL FUNDS REQUESTED \$
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I have read and agree to the requirements for the SRP to Teacher reimbursement.

SIGNATURE	DATE
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Human Resources

TUITION APPROVED \$	BOOK(S) APPROVED \$	TOTAL FUNDS APPROVED \$	PROGRAM MANAGER SIGNATURE	DATE
TITLE I	TITLE II	CODING STRIP		