

A SEPARATE SUMMER COURSE APPLICATION WILL BE MADE AVAILABLE TO ALL EDUCATORS IN APRIL

**Diocese of Allentown/Schuylkill IU#29
 Title II-A Project Registration Form
 Graduate Courses / CPE Classes / Workshops
 (Max. 3 apps for Courses/CPE/Workshops per person per school year Sept to Aug.)**

****Please PRINT complete information and include all required documentation to avoid delays in processing**
 forms with missing documentation or incorrect information, will be returned.**

*****Note: In order to be eligible for Title II-A funds, you must first provide proof/documentation that you have applied for and received your contractual tuition reimbursement funds in the current school calendar year *prior* to applying for Title II-A funds.**

Name of Applicant: _____ Subject/Grade: _____

Name of School where employed: _____ City: _____

Level and area of certification: _____

Home Address: _____

City/State/ZIP: _____ Home Phone: (_____) _____

Social Security #: _____ (**required** only if you have not received IU29 reimbursement in the past).

E-Mail Address (required) _____

(Note: you **MUST include an email address so you can be contacted in writing in case there is a problem or concern)**

Number of students taught on a daily basis: _____. Please indicate the number of these students who are:

Female _____ Handicapped _____ Minority _____ Economically disadvantaged _____ Have limited English Proficiency _____

College/University: _____ Term: _____ (Fall/Winter/Spring) Year: _____ Course Number: _____ Course Title: _____

(please attach a course description from course catalog or online source for verification purposes)

Course Start Date: _____ Completion Date: _____ Number of Credits: _____ **Tuition Reimbursement amt. :\$1,000.00**

All reimbursements are for tuition only with a maximum of \$1,000 reimbursable per course

How will this course help your teaching assignment to meet *State Standards?* (*state briefly*) _____

NOTE: Proof of successful course completion (grade report/transcript and proof of payment – receipt or course invoice clearly identifying tuition amount: PAID, copy or screen shot of cancelled check/credit card receipt) must be received within 20 days of course completion. Failure to provide documentation may result in forfeiture of course reimbursement.

Please check as appropriate:

1. I have registered and paid the tuition. Included with this application is the following:
 - Copy of registration confirmation and proof of payment as indicated above
 - Proof/documentation of receipt of contractual tuition reimbursement funds

2. I have registered but have not paid the tuition. **Will send proof of payment as shown above prior to course completion.**

Included with this application is the following:

 - Copy of registration confirmation
 - Proof/documentation of receipt of contractual tuition reimbursement funds

ASSURANCE: I have read the College/University's policy regarding financial obligations due to withdrawal from a course/workshop before completion. I understand that the grant will not pay any course costs if I withdraw from a course and I will be personally liable to pay those costs to the College/University.

_____ Date: _____
 Applicant's signature

_____ Date: _____
 Principal's signature

_____ Date: _____
 Diocesan Signature

Administrative signature on the application is considered assurance that the school has already allocated the \$1500 annual reimbursement available to full time diocesan teachers.