



DuPage High School District 88

REQUEST FOR PRE-APPROVAL OF COLLEGE COURSE WORK CREDIT

CLASSIFIED STAFF

(See Page 23 of the Classified Handbook for Guidelines)

PLEASE NOTE: ALL COURSE WORK MUST BE PRE-APPROVED PRIOR TO TUITION REIMBURSEMENT.

FAILURE TO COMPLETE THIS FORM ACCURATELY OR ATTACH NECESSARY DOCUMENTATION MAY RESULT IN NON-APPROVAL

NAME: _____ DATE: _____

SCHOOL: _____

DEPARTMENT / POSITION HELD :

I am seeking pre-approval for the following course work:

Course # _____ Course Name: _____

College or University _____

Semester/Qtr. Hours: _____ Department: _____

Start Date of Class/Program: _____ End Date: _____

Cost: _____

COURSE DESCRIPTION: *(Please attach copy of description from course guide or catalog)*

This course is related to my current position listed above in the following ways:

Building Administrator's Approval: _____

Approved

Disapproved

Committee Chairperson

Date