

Sunrise School Division

Division Procedures

Procedural Number - 2200

Procedural Title	Reimbursement of Professional Course Fees		
Date of Issue	2005	Related Procedure	
Revision Dates		Related Forms	
Review Date	2007	Originator	Superintendent

We believe that the ongoing professional learning of teachers benefits all of the students of Sunrise School Division. As a result, we included it into the Sunrise School Division/Sunrise Teachers' Association Collective Agreement. Article 8.02 states:

"For each unit professional course and each ½ unit professional course successfully completed beyond permanent certification, based upon the Superintendent's recommendation, the teachers shall be reimbursed \$200 and \$100 respectively."

- **Coursework/Programs that may be supported:**
 - Doctoral or Masters' level
 - Special Education Certificate
 - Post Baccalaureate
 - "Other" (Courses of interest but not necessarily towards a program)

- **Support Provided:** *6 credit course - \$200*
 3 credit course - \$100

- **Paperwork required:**
 1. Complete the information on the following page. This must then be submitted prior to the beginning of the course.
 2. Submit a copy of your transcript indicating your successful completion of the course.

- **Key Dates:**
 - Request forms and transcripts will be reviewed during the following time periods:

First week of October	submit by October 1 st
First week of February	submit by February 1 st
First week of June	submit by June 1 st

Effective January 1, 2006,

☀ Request forms must be completed and submitted to Carol Lackman in the Education Center, prior to the beginning of the course. If they are not, the request will not be reviewed. (If you are currently in a course, you need only submit transcript upon completion.)

☀ As of October 15, 2005, any additional requests for support for courses taken between February 2004 and August 2005 will not be reviewed.



Reimbursement of Professional Course Fees

Article 8.02

“For each unit professional course and each ½ unit professional course successfully completed beyond permanent certification, based upon the Superintendent’s recommendation, the teachers shall be reimbursed \$200 and \$100 respectively.”

Name: _____

School: _____

Course Title: _____

Number: _____




Dates (start and completion) _____

Program (Masters, etc.) _____

Institution (University of Manitoba, etc.) _____

Why are you taking this course/program?

Please submit to the Superintendent’s department according to the following timelines:

	First week of October	submit by October 1 st
	First week of February	submit by February 1 st
	First week of June	submit by June 1 st

Final approval for support is at the sole discretion of the Superintendent of Schools