## BLACK HORSE PIKE REGIONAL SCHOOL DISTRICT 580 ERIAL ROAD, BLACKWOOD, NEW JERSEY 08012 FAX # 856-227-6835

## SUPPORT STAFF APPLICATION FOR REIMBURSEMENT OF TUITION

**SCHOOL YEAR APPLICATION: 2024 - 2025** 

Name		School	Position	Department	
		n a request to enroll in and complete the following gradua ment consideration. Applications must be received by Mrs			ol year for which I
responsibilities. Co between 7/1/2024 a greater than the cu	ourses that and 6/30/20 arrent cost	additional compensation shall be provided only for a fall outside of the reasons listed above shall not be su 025 must be received before 12/1/2024. As per the bill per credit at Rutgers, the State University. Reimburses to be received by September 30, 2025.	bject to tuition re	eimbursement. <i>Applica</i> on assistance per credi	tions for classes completed t shall equal an amount no
OFFICE USE ONLY: COURSE Approved Denied		NAME OF COURSE	# CREDITS	ANTICIPATED COST PER CREDIT HOUR	ANTICIPATED COURSE COMPLETION DATE
My reasons for enro	olling in thes	se courses include:			
Name of College or	y Signature_	Date:			

Please scan and send to Angel Dugan at adugan@bhprsd.org. Please remember to keep a copy for your records. You will receive a signed copy once you are approved/denied.