



**REQUEST FOR APPROVAL OF CONTINUING EDUCATION UNIT(S)**

*This form **MUST** be approved prior to attending the workshop/course*

**INSTRUCTIONS:**

- You must have prior approval if you wish to have the CEU's/credits applied towards your pay increase
- Attach information about the workshop/course, including: descriptions, content, number of CEU's/credits, who is offering the workshop, etc.
- Once your supervisor has reviewed and signed off on this request, please sent it to the District Office for final approval. A copy will be returned to you for your records.
- Please refer to your contract for specific instructions related CEU's/credits and rate of pay advancements.
- Employees are eligible for a \$200 yearly education allowance, to be used for class fees. Each course registration must receive prior approval from the special services director. Payment will be paid upon presentation of expense receipts to the district Finance Director.

**FULL NAME** \_\_\_\_\_

**ID #** \_\_\_\_\_

DATE	TITLE OF WORKSHOP/COURSE	COURSE/WORKSHOP SPONSORED BY	NUMBER OF CEU'S TO BE EARNED	IS THE DISTRICT PAYING FOR YOU TO ATTEND THE WORKSHOP		ARE YOU BEING PAID YOUR HOURLY RATE OR A STIPEND	
				YES	NO	YES	NO

***SUPERVISOR TO COMPLETE:***

*Is this workshop/Course related to the employee's current assignment?*    **Yes**    **No**

*Comments:* \_\_\_\_\_

\_\_\_\_\_  
*Supervisor Signature*

\_\_\_\_\_  
*Date*

*To be completed by District Office*

**Request is:**    **APPROVED**                       **NOT APPROVED**

**Comments:** \_\_\_\_\_

**Superintendent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_