

MIAMI EAST LOCAL SCHOOL DISTRICT

**APPLICATION FOR
Educational Aide LICENSURE
REIMBURSEMENT**

I am requesting reimbursement for my licensure cost. I understand that I must complete this form and receive approval of the superintendent prior to reimbursement. For details, see Article 8.01 in the Master Agreement, listed below:

4. Educational Aide Permit (one-year renewal) Request for reimbursement must be received by the Board of Education by February 28th.

COST OF LICENSURE: _____

***Please attach new license to this form.**

STAFF MEMBER SIGNATURE

DATE

SUPERINTENDENT'S SIGNATURE

DATE

cc: Personnel File
Treasurer

Effective 2/2020