



REQUEST FOR APPROVAL : CRITICAL SHORTAGE AREA ADVANCED DEGREE REIMBURSEMENT PROGRAM

(To qualify, the program must lead to a degree in the critical shortage area and add a new certification endorsement area to the Maryland teaching certificate and/or allow the educator to become Highly Qualified in the shortage subject area)

Employee Name (Please print)		Last four digits of your Social Security Number
Work Location	Position	
Area of Study	College Attending	Projected Date of Completion/Graduation

CONDITIONS FOR APPROVAL

CAREFULLY REVIEW each statement below. Each statement must have your initials recorded indicating your agreement and understanding to the specified conditions in order to be approved for this program.

_____ I am requesting full tuition reimbursement, up to the University of Maryland – College Park graduate tuition rate standard for seeking an advanced degree in a critical shortage area. I understand that to receive reimbursement, I must apply at the end of each semester following the standard tuition reimbursement request procedures including submission of all required documents.

_____ I understand that I may request reimbursement for up to six credits per semester, including summers, for a maximum of 18 credits per year. To be eligible for reimbursement, I must earn a grade of 'B' or better.

_____ I understand that I am incurring a **four year service agreement** with Anne Arundel County Public Schools (AACPS) from the date of completion of my program and that such service will be in the area of my degree subject to available positions in that area.

_____ I understand that I am responsible for reimbursing AACPS for the cost of the additional tuition benefits received as a result of my participation in this program in the event that I do not complete the program OR separate from AACPS prior to completing the 4-year service requirement OR separate from AACPS prior to the reimbursement date.

_____ I have attached a written explanation of how this program will enhance my expertise on the job.

_____ I have attached a copy of my master's program signed by my college advisor along with my letter of acceptance.

_____ I am attaching a letter of recommendation from my supervisor as required.

Applicant Signature	Date
Principal Signature	Date
Regional Assistant Superintendent (Leadership programs ONLY) OR Curriculum Coordinator (content subject area)	Date
Approval: Director of Human Resources	Date

Notes:

- You are eligible for the enhanced reimbursement from the date you are accepted into the program. The acceptance date is the Director's approval date listed above.
- In the event of an overpayment, AACPS/Human Resources reserves the right to remove the overpayment from an employee's subsequent paycheck.
- For a current list of declared critical shortage areas, please visit www.aacps.org, Teachers, Tuition Reimbursement.
- Please refer to the TAAAC agreement, Article 9(l) regarding the Unit I reimbursement for Critical Shortage Areas.
- If approved, your reimbursement rate will be equivalent to the current UMCP graduate tuition rate for up to 18 credits per academic year.

Submit application and all documents to: **Tuition Reimbursement – Human Resources**