

**PRE-APPROVAL REQUEST FOR REIMBURSEMENT
ADDING COVERAGE TO PROFESSIONAL CERTIFICATE
(Completed by Principal)**

Educator Information

Name of Educator: _____

School Site Location: _____

Current Teaching Assignment: _____

Subject Adding: _____

Reason for Adding Coverage: _____

Principal's Signature

Date

Submit completed form to Nicole Chesser at ISB. Once the approval process is complete, a copy will be sent to you. This pre-approval form must be attached to reimbursement request.

Approved/Denied

Director of Elementary & Secondary Education

Date

Approved/Denied

Assistant Superintendent of Finance

Date