

REIMBURSEMENT APPLICATION – DUE MARCH 31, 2019

APPLICANT INFORMATION

First Name:	Last Name:
Mailing Address:	
Best Phone #:	E-mail (required):
Do you have a Teaching Credential?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Type:
Employer:	
School/Site Name:	Principal/Director Name:
School/Site Address:	Site Phone #:

EMPLOYMENT VERIFICATION (TO BE SIGNED BY EMPLOYER):

Current Assignment (check one):		
<input type="checkbox"/> Transitional Kindergarten Teacher (MUST work directly with at least ONE TK Student)		
<input type="checkbox"/> CA State Preschool Program Teacher (MUST work directly with Preschool Aged CSPP Children at least 15 hours per week)		
I certify that this applicant is currently teaching in the assignment identified above.		
Principal's/Director's Printed Name	Signature	Date

Education and Professional Cost Reimbursement

*Expenses eligible for reimbursement are limited to ECE/CD tuition, required textbooks, CDE-approved professional development registration fees incurred between July 1, 2014 and March 31, 2019.

*Attach all receipts, grades and/or certificate of completion. Keep copies for your records.

Course/Professional Development Title	College/University	# of Units/CEU	Begin/End Dates

Tuition/Fees	Description
\$	
\$	

Books	Course Title
\$	
\$	

By signing below, I am certifying all of the information provided above is true, correct and that all expenses requested for reimbursement have not been reimbursed by any other program.

Applicant Signature: _____ **Name:** _____ **Date:** _____

Send to rdort@nevco.org or mail to the Child Care Coordinating Council 640 E. Main Street Suite #3, Grass Valley CA 95945.

Remember to include with this application:

- A copy of your transcripts verifying the accredited college, the course name, number of units and proof of the receipt of a grade of "C" or better. Computer generated transcripts will be accepted if the college/university name, applicant's name, course name, term and grade are included on the printout.
- All applicable payment verification (receipts, proof of tuition payment, parking pass, etc.)
- W-9
- Confidential Profile Form for Direct Service – CA Dept of Ed

Keep a copy of all documents submitted, for your records. We will not give you copies of your application or any documents once they are submitted to CCCC. You will be notified by email confirming receipt of documents. Reimbursements are processed 2-3 weeks after approval, and as long as funds are available.

For more information, contact: Rossnina Dort, LPC Coordinator at 530.271.0258 or rdort@nevco.org

CTKS Administration Use Only	
Tuition and Fees	\$
Books	\$
Total Allowable Expenses	\$
Actual Reimbursement	\$
Date Approved	
CTKS Authorized Signature	