$\frac{\textbf{REQUEST FOR PARTICIPATION IN STUDY PROGRAM}}{\textbf{GROUP A}}$

participate by the Dis	e in a Study strict to tho	Program a se teachers	nt an accred	lited institu I in courses	tion. Tuition that are ap	on and relatoproved by	be eligible ted fees will the Superin	l be paid tendent's	
		and the Lor					nent betwee	n the	
	Name	;		_	School/Department				
	ake the foll <i>P APPRO</i>	_	rses: (<u>PLE</u> A	ASE ATTA	CH COPY	OF COUL	RSE DESC	<u>RIPTION</u>	
Cour Numb				Accree Agend Institu	ey or	Registratio Date		Tuition & Related Fees	
		Total request \$							
Do you ha	ave perman	ent certific	ation?	Area	and Date: _				
Date of A	ppointmen	t in School	District _						
Board of	Education a		ig Beach C	lassroom T			reement bet s above star		
List amou	ints of mon	ey previous	sly received	d through S	Study Mone	ey Approva	ls:		
Date	Amount	Date	Amount	Date	Amount	Date	Amount	Total Received	
						Applica	nt's Signati	ıre	
□ Approv	ved .	□ Not A _l	pproved						
						Superinten	dent's Desi	gnee	