



**ARLINGTON PUBLIC SCHOOLS**  
**Scholarship Application for Licensed Staff**  
**2018-2019 School Year**

Apply in advance

Name: \_\_\_\_\_ Employee ID # \_\_\_\_\_

School/Office: \_\_\_\_\_ Position: \_\_\_\_\_

Salary Scale: [ ] T-Scale [ ] P-Scale

Have you received previous scholarships? [ ] Yes [ ] No

The application must be received in Human Resources by the appropriate due date. Failure to submit the scholarship by its deadline will result in denial of the request. PIP G-3.2.3.31 Due dates:

[ ] Fall Semester, Friday - September 7, 2018

[ ] Spring Semester, Friday - January 4, 2019

[ ] Summer Semester, Friday - May 3, 2019

**PURPOSE FOR TAKING THE COURSE** Check one

Provisional License deficiency (Cited by the Virginia Department of Education)

License renewal or endorsement coursework (Reimbursed for 6 semester credits every five (5) years)

Professional Development Grant (Eligible for up to \$650 every five (5) years)

**COURSE INFORMATION**

College/University: \_\_\_\_\_

Course code/number: \_\_\_\_\_

Course Title: \_\_\_\_\_

Number of Credits: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

**TUITION INFORMATION**

- Textbook costs and associated fees are not eligible for reimbursement.
- Maximum reimbursement is **\$350 per credit hour up to \$1,050** effective Fall 2017 per the UVA K-12 Educators rate.
- If applying for the Professional Development Grant, then you may only request up to \$650.00.

\$ \_\_\_\_\_ ENTER THE \$ AMOUNT YOU ARE REQUESTING

**HUMAN RESOURCES OFFICE USE ONLY**

Scholarship: **APPROVED** **DENIED**

Amount Approved: \_\_\_\_\_

**IF APPLYING FOR THE \$650 PROFESSIONAL DEVELOPMENT GRANT, COMPLETE BELOW:**

Start date with APS: \_\_\_\_\_ [ ] Full-time [ ] Part-time

Are you working toward a degree? [ ] Yes [ ] No

If yes, Degree and Major: \_\_\_\_\_

If working toward an additional endorsement, please list it: \_\_\_\_\_

How does this college course relate to your PDP and help you in your present assignment? Be specific.

**PROCEDURE TO APPLY**

1. Prior to taking the course and/or by the semester deadline, employees shall apply for tuition assistance. *PIP G-3.2.3.31*
2. One complete application per course is required.
3. The maximum amount that can be reimbursed under the scholarship program is \$350 per credit hour up to \$1,050 for a three (3) credit course.
4. Assistance may be determined by the availability of funds.
5. Your proposed course must meet state licensure requirements, relate directly to your assignment, and be approved by your principal/administrator.

**REFUND PROCESS**

1. Provide a receipt showing and a \$0 balance and a receipt indicating the amount of tuition paid.
2. Label your grade report or transcript as "Scholarship Refund".
3. The minimum passing grade of a C or better is required.
4. After your successful completion of the course, send your grade and receipt within 60 days to the **Human Resources Department / ATTN: SCHOLARSHIP REFUND**.
5. Due to the end-of-year closing procedures in the Finance Department, grades or transcripts received after May 17, 2019 will be processed after July 1, 2019.
6. The refund is direct deposited into your account on record with APS.

**AGREEMENT**

This grant is awarded for a specific course, and you must agree to pursue the approved program of study. If, for any reason, it becomes necessary to deviate from that plan, you should immediately contact Human Resources. I am aware of the criteria considered in making scholarship awards and understand that if I am granted a scholarship I will not receive the money until after I have successfully completed the course. If I am unable to complete the terms of my contract with the Arlington Public Schools, unless terminated involuntarily for the ensuing year, I agree to return the full amount of the grant before the last workday. I will return the full amount prior to the termination of my employment. If I fail to do so, I hereby authorize the Arlington Public Schools to withhold the full amount from my final paycheck.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
Principal/Administrator