

MOUNT UNION AREA SCHOOL DISTRICT
APPLICATION FOR PRE-APPROVAL OF COURSE(S),
IN-SERVICE CREDIT(S), AND TUITION PAYMENT
CONTRACT YEAR: _____

Name (Last, First): _____

Social Security Number: _____ - _____ - _____ Grade Level: _____

PRE-APPROVAL AND COURSE INFORMATION

Course Title/Class Dates	Credit Value Credit Hours	College/University I.U./Other	COST
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Approved

Not Approved

Employee's Signature

Superintendent's Signature

Date Submitted _____

Date _____

PLEASE SUBMIT THIS FORM TO THE SUPERINTENDENT'S OFFICE