

**ADDISON NORTHWEST SUPERVISORY UNION**  
**District Course Approval & Local Standards Board Relicensure Activity Request /Approval**  
**(FORM LSB-B)**

**Section 1. TEACHER INFORMATION**

Name: \_\_\_\_\_ Position: \_\_\_\_\_  
School: \_\_\_\_\_ Level (check one): I  II   
Endorsement(s) Held: \_\_\_\_\_ License Expiration Date: \_\_\_\_\_  
Endorsement(s) to which this activity applies: \_\_\_\_\_

**Section 2. ACTIVITY INFORMATION**

Name of Activity \_\_\_\_\_  
Sponsoring Institution: \_\_\_\_\_  
Type of Activity:  Academic Course  Workshop  Conference  Nontraditional  
Anticipated Completion Date: \_\_\_\_\_ (mm/dd/yr) Requesting Credit:  Y  N  
Anticipated Number of Hours: \_\_\_\_\_ Number of Credits Requested: \_\_\_\_\_  
Total Cost: \$ \_\_\_\_\_ [15 hours = 1 credit; ¼ credit minimum increments]  
How does this activity relate to the goals in your PGP, IPDP and/or the District Action Plan? **(Must attach description on a separate typed page)**  
Nontraditional Activity:  (Attach description of nontraditional activity)

**PRINCIPAL APPROVAL of Activity**

Reviewed & Supported by: \_\_\_\_\_ Date: \_\_\_\_\_  
Principal's Signature

**NOTE: All Degree Programs Require Superintendent Approval.**

**Section 3. PAYMENT PROCESS**

Payment made by District (include **completed** registration form with all necessary information)  
 Purchase Order PO# \_\_\_\_\_ Funding Source: \_\_\_\_\_

**PRIOR APPROVAL FOR PAYMENT:**  Approved  Disapproved \$ \_\_\_\_\_ Amount

Reviewed & Supported by: \_\_\_\_\_ Date: \_\_\_\_\_  
Superintendent's Signature

**Section 4. LSB SECTION /FINAL APPROVAL (Required)**

1. Attach appropriate documentation  Transcript  Grade Report  Certificate  Other \_\_\_\_\_
2. Attach a reflective narrative of how this activity improved your teaching practice and/or student learning.

**FINAL APPROVAL** \_\_\_\_\_  
LSB Board Chairperson # of credits Date

**Section 5. CENTRAL OFFICE FINAL DOCUMENTATION:**  Transcript  Grade Report  Certificate  
 Other \_\_\_\_\_ Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_

**\*\* All sections must be completed and required documentation attached \*\***

**ADDISON NORTHWEST SUPERVISORY UNION  
INSTRUCTIONS FOR  
COURSE APPROVAL & LSB RELICENSURE ACTIVITY REQUEST FORM**

If you have any questions with regard to the processing of these new forms, please do not hesitate to contact the SU Office at 877-3332. Thank you!

- Step 1:** Complete Section 1 and 2 with ALL information requested using the online form.
- Step 2:** Print the form and submit to Principal for activity approval and **please include a completed registration form with all necessary information.**
- Step 3:** The Principal will submit all documents to the Superintendent for approval of payment. A copy of these approvals will be given to the educator.
- Step 4:** The approved form will be forwarded to the LSB Board for review.

**Payment Process**

Per the 2010-2012 Collective Bargaining Agreement, Article XIV, Section 14.3:

*District payment of costs associated with professional development activities referenced in 14.1 and 14.2 shall be unlimited to the equivalent of the UVM per credit hour for the designated semester. Payment of such costs will be made by the District, in advance, at the time of registration for the professional development activity. The cost of courses or other professional development activities that are not satisfactorily completed, i.e., documentation of credit or attendance, shall be reimbursed by the teacher to the District through an equivalent payroll deduction as mutually agreed to by the Superintendent and the teacher.*

If a purchase order is used for payment, a copy of the purchase order must be attached with the Approval form.

Upon completion of an activity, documentation of credit or attendance shall be submitted within six (6) weeks of completion.

- Tuition Reimbursement can only be used for registration, course fee.
- All other related expenses, i.e. books, travel, accommodations, must come out of Travel Reimbursement. Complete a **TRAVEL REIMBURSEMENT** form for reimbursement along with a copy of Certificate of Attendance and **all** receipts.