

FAIRFIELD TOWNSHIP SCHOOL DISTRICT

375 Gouldtown-Woodruff Road
Bridgeton, NJ 08302

Teacher Course Approval Request

Name: _____ Date: _____

Position: _____ Grade / Subject: _____

Enrollment Information

College / University: _____

of Courses: _____

Course Name(s): _____

Description: _____

Semester () Fall () Spring () Summer

Year _____ Credits _____

Start & End Dates of Course: _____

Approval required prior to registration for the course. Upon submission of appropriate documentation of completion, candidate may be eligible to receive a maximum up to \$1,600 annually for the 2023-2024 school year payable one calendar year after completion provided teacher is still an official employee of the district.

() Approved () Disapproved

Assistant Principal's Signature

Date

Board Approval: _____
Date

() Approved () Disapproved

Superintendent's Signature

Date