Reimbursement Cover Sheet

Date __________________________ Name ____________________________________________
Employee ID# ____________________ Best Phone Number __________________________
School District Email Address ____________________________________________________

Check the box next to the reimbursement that you are applying for.

☐ Praxis Reimbursement
   Submit: Passed Praxis Scores and Proof of Payment

☐ Level II Reimbursement
   Submit: Official Sealed Transcript showing completion of course with a “B” or better and Proof of Payment

☐ Emergency Permit Application Fee
   Submit: Emergency Permit or Approval email from the Pennsylvania Department of Education and Proof of Payment

☐ Certification Program Courses
   Submit: Official Sealed Transcript showing completion of course with a “B” or better, Proof of Payment and Emergency Permit or Intern Certificate

☐ Career Development Fund
   Submit: Official Sealed Transcript showing completion of course with a “C” or better, Proof of Payment and Career Development Fund form

☐ National Board Certification Application Expenses
   Submit: Congratulations Letter and Proof of Payment

Submit to: School District of Philadelphia
           440 N. Broad Street, Suite 2222
           Philadelphia, PA 19130
           reimbursements@philasd.org