

FORT LA BOSSE SCHOOL DIVISION

TITLE - **EXTENDED INSTRUCTIONAL PROGRAMS**

POLICY - **IHC-E-3**

Approval Date - 11/02/02

Cross Reference -

Resolution # - 51/02

Implementation - 11/02/02

Legal Reference -

Last Reviewed - 09/04/12

CORRESPONDENCE COURSE REIMBURSEMENT

Please be advised that

Name

Address

has successfully completed his/her Manitoba Education and Training Independent Study course and obtained a final mark of _____. The above named student completed this course while attending _____ as a resident student.

The Correspondence Course was necessary as:

_____ Course was not offered at the school.

_____ Timetable conflicts, which the school was responsible for, did not permit the course to be taken.

Registration in the course was approved in advance by the school principal, or designate, according to division policy. Therefore, reimbursement of the course registration fee in the amount of _____ is requested.

Date

Principal, or Designate

* Please note that the course registration fee was paid by the following parent/guardian and reimbursement should be made to him/her:

Name

Address

