

Form B/C-F

T.E.A.C.H. Early Childhood® Iowa

Child Development Home Tuition/Book/Release Time Reimbursement Claim

Recipient Information				
Recipient Name: _____	College: _____			
Address: _____	T.E.A.C.H. Counselor: _____			
City, State, Zip: _____				
Email Address: _____				
Term Attended: (Mark One)	SPRING	SUMMER	FALL	OTHER _____ (Year)

Courses Taken This Semester		
Course Number:	Course Title:	Credit Hours:
_____	_____	_____
_____	_____	_____

Books				If a book was not purchased, rented, or receipts are not available, please circle N/A below.		
We cannot issue a reimbursement without copies of receipts.						
Total books amount: \$ _____	Books paid by: (mark one)	Student	Program	Pell or other grant	N/A (No Book Purchased)	
Book Titles			Course Number		Price	
_____			_____		_____	
_____			_____		_____	
_____			_____		_____	

Release Time (To calculate hours of Release Time use chart on reverse side of form)		
Hours of Release Time claimed (maximum of 48 hours/semester)	=	_____
Rate of Reimbursement:	X	\$15.00
Total Amount of Release Time Reimbursement	=	_____

Recipient Signature: _____ Date _____

For Office Use Only:		Funder: _____	
Tuition and Fees		Date Submitted for Approval: _____	
Amount: \$ _____	Tuition paid by: \$ _____	\$ _____	\$ _____
	<i>Student</i>	<i>Program</i>	<i>Pell or other grant</i>
			<i>T.E.A.C.H.</i>
Travel/Internet			
You are entitled to a Travel/Internet Stipend of \$100 per active semester.			

Return with receipts to:

T.E.A.C.H. Early Childhood® Iowa
 Iowa Association for the Education of Young Children
 6200 Aurora Avenue, Suite 605E, Urbandale, Iowa 50322
 Phone: 515-331-8000 • Fax: 515-331-8995

(PLEASE FOLLOW ENCLOSED INSTRUCTIONS)

FORM B/C INSTRUCTIONS

Recipient Information

- Fill in or review information including: recipient name, address, city, state, zip, email address, college, and T.E.A.C.H. counselor.
- Circle the term and list the year you are attending school.

Tuition and Fees

- List the course number, title, and number of credits for each course you are taking. We suggest you contact your T.E.A.C.H. counselor prior to registration to be sure the courses you'd like to register for are authorized under your scholarship. *If you register and pay for courses NOT authorized under your scholarship, you will not be reimbursed for tuition or books for these courses.*
- We must have a college statement if you pre-paid tuition and you are requesting a reimbursement from T.E.A.C.H.; this statement should indicate that the tuition has been paid.

Books

- If you did not purchase or rent books, circle "N/A - No book purchased".
- Please list **full book titles** of the books, the course number for which the book was required, and the price for each.
- Include **standard** shipping and tax charges if applied.
- T.E.A.C.H. **will not** pay for home computers, computer software, or school supplies.
- Total the price for books, without tax, and list the amount.
- Indicate who paid for the books, the student, the program, or a Pell grant.
- Attach a **copy** of your book receipts, with your name written on it, to the back of this Form B/C. T.E.A.C.H. **will not** reimburse for books without a copy of the book receipt.

Release Time

- Use the following grid to calculate how much release time to claim:

Number of credits you enrolled in this semester	Total number of Release Time hours you claim
1	16
2	32
3+	48

- Multiply hours of Release Time claimed by reimbursement rate (\$15.00).
- Sign and date form

It is **your** responsibility to see that the Form B/C is completed each semester. We reserve the right not to reimburse any claims submitted more than 30 days following the **end** of the semester! If you have any questions about completing these forms, please call T.E.A.C.H. IOWA at (515-331-8000).