

ACTEM Professional Development Reimbursement Request

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_ School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: ME Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Course Title: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Location: \_\_\_\_\_

Course Description:

How do you think this course will increase your technology skills and knowledge?

Registration Cost: \$ \_\_\_\_\_  
District Reimbursement: \$ \_\_\_\_\_  
Other reimbursements: \$ \_\_\_\_\_

Remaining out of pocket Registration Cost  
To be reimbursed: \$ \_\_\_\_\_

Note: You will be notified on the approval status of your application usually within two days of when it is received. At the end of the course, in order to receive your reimbursement, we must have both: (1) A copy of your payment. If you are paying by personal check, we must have a copy of the check. If you are paying by credit card, we need to have a copy of your credit card statement. (2) A copy of the proof of completion certificate when the course is finished. The documentation must be submitted within 60 days of the end date can be mailed to Dennis Kunces, 70 Troop Rd., Pittston, ME 04345 or can be faxed to 624-6791 attention: Dennis Kunces or scanned as an email attachment to [dennis.kunces@maine.gov](mailto:dennis.kunces@maine.gov).