

Submit completed form to:
HUMAN RESOURCES
OTSEGO NORTHERN CATSKILLS BOCES
 PO Box 382, 2020 Jump Brook Road
 Grand Gorge, NY 12434
 607-588-6291, Ext. 2177 or 2178



OTSEGO NORTHERN CATSKILLS
 BOARD OF COOPERATIVE EDUCATIONAL SERVICES

STUDY GRANT APPLICATION

EMPLOYEE: _____ POSITION: _____
 ADDRESS: _____ LOCATION: _____

COLLEGE ATTENDING: _____ SEMESTER: _____

Please select one of the following options:

- Study Grant - I elect to receive reimbursement for college courses as outlined in my respective employee contract.
- Salary Adjustment - I elect to receive a salary increase for college credits as per my respective employee contract.

SUMMARY OF ESTIMATED EXPENSES

Course No.	Course Title	Credit Hrs.	Cost
1ST			
2ND			
3RD			
	BOOKS		
	OTHER EXPENSES (Lab Fees, Etc.)		
	TRAVEL (Support Staff Only)		
		TOTAL	\$ _____

- Are you receiving educational expense funds from another source? _____
- Did you receive funds during the last school year? _____
- If so, what semester? _____
- Please briefly describe how these courses will benefit you in your current position? _____

Employees will be notified of application status following board action. Estimated course costs are not necessarily the amount you will receive. Payment is made according to available funds and guidelines for respective group. Salary adjustments are made September 1 and February 1. For assistance of information, call the Human Resources office at (607) 588-6291, Ext. 177/178. **APPLICATIONS CANNOT BE ACCEPTED AFTER DEADLINES.**

DEADLINES: SUMMER, JUNE 1; FALL, SEPTEMBER 30; SPRING, JANUARY 31

SUPERVISOR SIGNATURE _____ **Date** _____

DEPUTY SUPERINTENDENT SIGNATURE _____ **Date** _____

HUMAN RESOURCES SIGNATURE _____ **Date** _____