

Mitchell College Education Department

Reimbursement Form

Fill out the form below completely. All receipts should be attached to the form and emailed to lewis_l@mitchell.edu.

Date	
Student Name	
Student Phone Number	
Home Address	
Personal Email	
EIN Number	

	Date		
Description of Purchase	Registered	Date Taken	Cost
Foundations of Reading Exam			
Early Childhood Praxis Exam			
EdTPA			
Fingerprints for Fieldwork			
		Total	
		ruldi	

Do you have a financial need? _____ Do you intend to become a certified teacher either through Mitchell's Bachelor Program or through a Master's Program? _____ Is there any other information you would like to share about your application?

APPROVED -- AMOUNT APPROVED _____DATE_____

Dr. Alison Reichard, Certification Officer	
Dr. Christopher Clouet, Department Chair	

All applications are subject to approval by the Department Chair. Monies will be issued on a first come, first served basis until the grant has been depleted. Students are not guaranteed reimbursement. FY2024