

BARROW COUNTY SCHOOL SYSTEM

GACE Reimbursement

Funding may be available through Title I, Title II, or Special Education to pay for reimbursement for the cost you incurred taking the GACE. In order to be eligible consideration for reimbursement, you must meet the following criteria:

- 1) the GACE you take is necessary for you to be considered "highly qualified" in the area in which you have been assigned to teach,

and

- 2) you must have been offered a contract and signed a contract to teach at the school where you are currently assigned for the current school year.

Please complete the following.

Name: _____

Current teaching assignment:

School: _____ Grade(s): _____ Subject(s): _____

GACE information:

Test name: _____ Test Code: _____ Date Taken: _____

Test name: _____ Test Code: _____ Date Taken: _____

Test name: _____ Test Code: _____ Date Taken: _____

Test name: _____ Test Code: _____ Date Taken: _____

I certify that the educator named above was required to take the GACE in order to be considered "highly qualified" in the area in which he/she been assigned to teach and that he/she has been offered a contract and signed a contract to teach at my school for the current school year.

Principal's signature _____ Date _____

I certify that I took and passed the GACE in order to be considered "highly qualified" in the area in which I have been assigned to teach and that I have been offered a contract and signed a contract to teach in Barrow County Schools for the current school year.

Educator's signature _____ Date _____

Please submit this completed and signed form to Meggan McNally at the PDC along with:

a) proof of payment (copy of your cancelled check or credit card statement)

b) Examinee Score Report showing a passing score

DISTRICT USE ONLY:

Approved for reimbursement: _____ Date: _____
(signature)

Amount: _____ Funding code: _____