Related Educational Expense Reimbursement Form
KIDS Now Early Childhood Scholarship Program

To be completed by the Scholarship Recipient and sent to your Professional Development Counselor within 30 days of end of semester:

Name: _____
Last First MI

Home Address:	
City:	
State and Zip Code:	
Phone #:	
Social Security #:	
Date of Birth:	

Name of Institution Attended: _____

Copy of official grade report attached? (check or bold one)

- ❑ Yes
- ❑ No (reimbursement cannot be processed for payment)

Reimbursement For Semester (check or bold one):

Fall	Year: 200
Spring	Year: 200
Summer	Year: 200

Check or Bold the Credential, Certificate or Degree coursework pursued:

- ❑ Child Development Associate Credential (at postsecondary institution) $50.00 Reimbursement
- ❑ Early Childhood AA Degree - $100.00 Reimbursement
- ❑ Early Childhood AAS Degree - $100.00 Reimbursement
- ❑ Early Childhood BS Degree - $100.00 Reimbursement
- ❑ Early Childhood Development Director's Certificate - $100.00 Reimbursement
- ❑ Early Childhood Development Trainer's Certificate - $100.00 Reimbursement

I affirm that the above information is true and correct:

Student/Employee Signature: _____ **Date:** _____

I acknowledge the above named employee is working 20 hours per week in a participating KIDS Now Scholarship early childhood setting:

Employer Signature: _____ Date: _____

Mail to : **Kim McIntyre, Professional Development Coordinator**
WKU Child Care Resource &Referral Agency
344 Tate Page Hall TTAS- WKU
Bowling Green, KY 42101

Scholarship Recipient: Keep a copy of this signed document