



## REIMBURSEMENT FORM FOR ASSOCIATE TEACHERS

**CHECK ONE (AND ENTER YEAR):**

☐ First Placement: September \_\_\_\_\_(yr.) **OR** January \_\_\_\_\_(yr.)

☐ Second Placement: October \_\_\_\_\_(yr.) **OR** March \_\_\_\_\_(yr.)

**Deadline: Forms need to be returned by the end of the first week of the placement**

Associate Teachers will receive a stipend of \$220 per student teacher. In cases where two associate teachers are assigned to one student teacher, the stipend will be split between the associate teachers.

**In order to process your stipend payment in a timely fashion, please complete this sheet and FAX to 716.932.2614 as soon as possible. It is very important that we have your full name and correct address and zip/postal code so that your stipend may reach you. Stipend checks cannot be processed without this form. *Please note, stipends are not mailed until after the student teacher candidate's placement has begun.***

Should you have any questions, please email [deborah.m.allen@medaille.edu](mailto:deborah.m.allen@medaille.edu).

Thank you in advance for your cooperation.

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**NAME OF ASSOCIATE TEACHER:** \_\_\_\_\_

**SCHOOL NAME:** \_\_\_\_\_

**HOME MAILING ADDRESS:**

**MAILING ADDRESS:** \_\_\_\_\_

**CITY/STATE OR PROV:** \_\_\_\_\_

**POSTAL/ZIP CODE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**NAME OF YOUR MEDAILLE COLLEGE STUDENT TEACHER CANDIDATE:**

**NAME OF CANDIDATE'S COLLEGE SUPERVISOR**