

Marketplace for Kids Credit Reimbursement Form Professional Development Credit Course

106 Mathews Street Suite B PO Box 9 Mantador, ND 58058 Phone: 701.242.7744 Fax: 701.242.7754

	GISTRANT INFORMA	ATION		
Name			Date	
Teaching Grade	School/Mailing Address			
COURSE INF	ORMATION			
Registered Unive	rsity			
Education Day At	tended (Virtual/In-Person)			
	IENT INFORMATION		_	
Contact Person			Telephone Number	
Payable To			1	
Mailing Address		City	State	Zip Code
I certify this requ	est is correct and complete a	and that all expendi	tures are a	ccurate.
Signature			Date	
			1	
	FOR OFFICE	USE ONLY		

Rate of Payment	Total	Marketplace for Kids Approval	Date
\$50.00	\$		
Comments			