

Application for Approval of Credit for Salary Advancement

DUE BY THE FIRST FRIDAY IN SEPTEMBER

NAME _____ DATE SUBMITTED _____

College/ University	Course Date	Course Number	Course Title	Semester Hours

Official Transcript(s) Attached: YES ☐ NO ☐ NOTE: This will not be process without all transcript(s) for courses listed above.

Justification:

CREDIT WILL APPLY TO:

_____ BA+15 _____ BA+30 _____ MA _____ MA+15 _____ MA+30 _____ Ed.S

FOR HUMAN RESOURCES USE ONLY

APPLICATION FOR SALARY ADVANCEMENT: APPROVE _____ REJECT _____

NOTES:

Signature _____
Assistant Superintendent of Human Resources Date