

APPENDIX G

Note:

This form should be completed, filed, and approved with the Unit Office before taking class!

DATE: _____

TO: **Virден CUD#4. Supt**

FROM: _____

RE: **Advancement on Salary Schedule**

I would like approval for the course _____
(name and number)

offered by _____ University. The course is a

_____ semester credit hour course. I plan to take the course during the _____ semester,

_____ (year). I would like the credit hours to be considered hours toward salary scale increase.

This class is _____, is not _____ on a degree program.

DATE: _____ SIGNATURE: _____

NOTE: (Copy of a grade card or a transcript from the University demonstrating successful completion, must be on file in District Office by date in Master Contract.)

Office Use

APPROVED

NOT APPROVED

DATE:

SIGNATURE: