

# APPLICATION COURSE APPROVAL FORM

Name: \_\_\_\_\_ Date: \_\_\_\_\_

School/Level: \_\_\_\_\_ Subject or Grade Level: \_\_\_\_\_

- Approval **is required prior to enrollment** for salary advancement. (See *EMPLOYEE HANDBOOK*, Appendix A pp 18-19).
- You **must** attach supporting materials such as course description, brochure, syllabus.
- This form **must** be signed by your site administrator prior to sending to the District for approval.
- Course approval for salary advancement is required for **all** courses, conferences, and trainings, including those offered by the District.
- Coursework for salary advancement **must** be completed by **August 31<sup>st</sup>** of the current school year.
- Official transcripts **must** be received in the Human Resources Office on or before **September 5<sup>th</sup>** of each year in order to receive salary credit for that school year (no exceptions).
- Course approvals for established programs (masters, licensure, etc.) may be submitted under one **Approval form**. Changes in course numbers or titles need to be updated with a new course approval form.
- **Failure to obtain pre-approval:** coursework taken without prior approval will not be available for salary advancement.

Course Number: \_\_\_\_\_ Course Title: \_\_\_\_\_

College/University: \_\_\_\_\_ Dates of Course: \_\_\_\_\_

Location: \_\_\_\_\_ # of Semester Units/Credits: \_\_\_\_\_

Is this institution an accredited college or university through the U.S. Department of Education at <http://ope.ed.gov/accreditation/>?                      Yes                      No

Please provide a brief rationale as to how the course(s) align(s) with your professional growth (Form A, SLO's) and/or building or District goals.

I am working toward advancement to, but will not have attained, the training level of: \_\_\_\_\_.

The above credits will place me, for contract purposes, at the following training level (circle one):

BA+10    BA+20    BA+30    BA+45    BA+60    BA+75    BA+90  
MA       MA+10    MA+20    MA+30    MA+40

### FOR ADMINISTRATIVE USE ONLY

I CERTIFY THAT THE COURSE REQUESTED MEETS the District requirements for credit and will be beneficial to the teacher's current or future assignment. Date

Principal/Supervisor Endorsement: \_\_\_\_\_

Director of Human Resources: \_\_\_\_\_

**Forward completed form with administrative signature and program schedule to the  
Human Resource Department, Educational Services Center**

**APPLICATION  
COURSE APPROVAL FORM**

Course Number: \_\_\_\_\_ Course Title: \_\_\_\_\_

College/University: \_\_\_\_\_ Dates of Course: \_\_\_\_\_

Location: \_\_\_\_\_ # of Semester Units/Credits: \_\_\_\_\_

Course Number: \_\_\_\_\_ Course Title: \_\_\_\_\_

College/University: \_\_\_\_\_ Dates of Course: \_\_\_\_\_

Location: \_\_\_\_\_ # of Semester Units/Credits: \_\_\_\_\_

Course Number: \_\_\_\_\_ Course Title: \_\_\_\_\_

College/University: \_\_\_\_\_ Dates of Course: \_\_\_\_\_

Location: \_\_\_\_\_ # of Semester Units/Credits: \_\_\_\_\_

Course Number: \_\_\_\_\_ Course Title: \_\_\_\_\_

College/University: \_\_\_\_\_ Dates of Course: \_\_\_\_\_

Location: \_\_\_\_\_ # of Semester Units/Credits: \_\_\_\_\_

Course Number: \_\_\_\_\_ Course Title: \_\_\_\_\_

College/University: \_\_\_\_\_ Dates of Course: \_\_\_\_\_

Location: \_\_\_\_\_ # of Semester Units/Credits: \_\_\_\_\_