

**SCOTCH PLAINS-FANWOOD SCHOOL DISTRICT  
HORIZONTAL SALARY ADJUSTMENT FORM IV**

DATE: \_\_\_\_\_

TO: SUPERINTENDENT/DESIGNEE AND SPFEA CREDENTIALS COMMITTEE

FROM: \_\_\_\_\_

LOCATION: \_\_\_\_\_

SUBJECT: \_\_\_\_\_

GRADE/ASSIGNMENT: \_\_\_\_\_

**PLEASE HAVE OFFICIAL TRANSCRIPTS FORWARDED DIRECTLY TO THE HUMAN RESOURCES OFFICE ATTENTION DIRECTOR OF HUMAN RESOURCES.**

I. Circle your current position on the Salary Guide:

BA BA+30 MA MA+30 Advanced Degree (Post Masters)

II. Circle degree level for which you are seeking advancement on the Salary Guide:

BA+30 MA MA+30 Advanced Degree (Post Masters) Doctorate

III. Name of Accredited College/University: \_\_\_\_\_

IV. Title of Degree/Program of Study: \_\_\_\_\_

V. Please attach a copy of your Anticipated Horizontal Advancement on Salary Guide Form III approved by the Business Administrator.

VI. Current Certifications Held: \_\_\_\_\_

VII. List graduate level courses to be reviewed by the Superintendent's Office and SPFEA Credentials Evaluation Committee:


EMPLOYEE SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

FROM: \_\_\_\_\_

LOCATION: \_\_\_\_\_

SUBJECT: \_\_\_\_\_

GRADE/ASSIGNMENT: \_\_\_\_\_

**FOR SUPERINTENDENT OFFICE USE ONLY:**

Date Received: \_\_\_\_\_

Other Action: \_\_\_\_\_

Approved By: \_\_\_\_\_

(Signature of Superintendent/Designee)

(Date)

**FOR SPFEA CREDENTIALS EVALUATION COMMITTEE USE ONLY:**

Date Received: \_\_\_\_\_

Other Action: \_\_\_\_\_

Reviewed By: \_\_\_\_\_

(Signature of SPFEA Representative)

(Date)

Reviewed By: \_\_\_\_\_

(Signature of SPFEA Committee Chair)

(Date)

	FROM	TO
SALARY DEGREE LEVEL		
SALARY DOLLAR AMOUNT		