

HUMBOLDT UNIFIED SCHOOL DISTRICT #22
PROFESSIONAL STAFF DEVELOPMENT REQUEST

Directions for filing application:

- Complete one application for each course/workshop/+
Submit completed form(s) to the District Office for pre-approval

Date: _____

Assignment: _____

Name: _____

Certified _____ Classified _____

Current Degree + credits (ie:MA+3) _____

Work Location: _____

I request that the proposed coursework, workshop, training, or conference listed below be approved for horizontal movement under Board Policy GCBA and GCI. Seat hours will also count toward recertification.

GRADUATE WORK

Institution (Full Name): _____

Course Number: _____ Title: _____

Date Class Begins: _____ Date Class Ends: _____

Number of Course Credits: _____ Check One: Graduate _____ OR Upper Division _____

UNDERGRADUATE WORK/WORKSHOPS/+

Note: The maximum number of district credits for undergraduate work, workshops*, and similar activities that will count for certified horizontal salary movement is twenty-four (24) credits.

Name of Activity: _____

Activity being presented by (full details: attach supporting documents): _____

Semester Hours Credit (undergraduate): _____ OR Total Seat Hours (activity*): _____

Date(s) of activity: _____

Describe how the activity is directly related to your present/future subject specialization. _____

I affirm that I will be paid no District wage to participate in the above activity. I understand that the annual deadline for submitting documentation for completed work to the District Office for salary movement is September 1. I also understand that approval MUST be granted in advance to be eligible for horizontal movement credit and that the course must be directly related to my subject specialization. I further understand that any false or misleading statements shall be grounds for disciplinary action; including, but not limited to, dismissal. To receive credit, appropriate documentation must be submitted signed by the approved presenter/organization. Official Transcript(s) must be submitted to receive credit for college/university coursework. *15 seat hours = 1 semester hour equivalent/ 1 semester credit

Signature of Requestor

Approval of Site Principal/Supervisor _____ Date: _____

District Office Action District Credit ** Approved _____

APPROVED _____ Comments: _____

NOT APPROVED _____

Signature of District Office Representative

Date