Watertown-Mayer Public Schools • ISD #111

Professional Growth Graduate Courses & Program Approval Form

PART I

The purpose of this form is to receive tentative approval of courses or programs for lane changes on the salary schedule. To apply on the salary schedule, these courses(s) must be germane to your major and/or minor certification or credits taken in areas in which you are currently assigned. Furthermore, all credits beyond a bachelor's degree must be graduate credits and carry a grade of B or higher. Undergraduate credits to complete a major in a given assigned area may be approved in advance by the Superintendent. These courses must generate credits in an appropriately accredited graduate program at an appropriately accredited college or university. If the course generates continuing education credits or graduate level continuing education credits (or the equivalent) but not actual graduate credits, the credits will not be applied to advancement on the salary schedule. The school district will only be able to determine whether or not you have received graduate credits after reviewing transcripts from the post-secondary institution. Please refer to the Master Agreement for additional information about lane changes.

Please turn in the completed form to the building-level teacher representative on the Professional Growth Committee with copies of all course or program descriptions. The teacher representative will review the information with the Superintendent and return the form to you marked either "Approved" or "Not Approved".

If the course or program is approved, you must retain the Professional Growth Course & Program Approval Form (Part I) until you qualify for a lane change. At that time, you will turn in a Lane Change Request Form (Part II), applicable Professional Growth Course or Program Approval Forms, and transcripts to the building-level teacher representative. The teacher representative will review the paperwork and submit it to the Superintendent for approval.

_____ _____

Name of Teacher — Teacher Signature (acknowledging understanding of stipulations above)

_____

Teaching Assignment

_____ _____

College or University — Date of Application

_____	_____	_____	_____	_____	_____
Course or Program	Course#	Course#	Course#	Course#	#of Credits

_____

Semester of intended Enrollment (For example, "Spring Semester 2022")

☐ Approved ☐ Not Approved (If not approved, state reason.) Building-Level Teacher

_____ _____

Representative's Signature — Date

_____ _____

Superintendent's Signature — Date

Attach a copy of the course or program description.**Please retain a copy of this form to submit with Part II**