THE SCHOOL DISTRICT OF UNIVERSITY CITY
Transform the Life of Every Student Every Day!

Channel Change Process Certified Staff

For a change in channel to become effective for any given semester, a written request, along with all necessary supporting documentation will be sent to the Assistant Superintendent for People and General Administration no later than August 31 or January 31. Information regarding the policy can be found on page 31 of the Teachers Article of Agreement.

The following steps should be followed when applying for channel change request:

1. A completed Channel Change form should be submitted along with official transcripts to Human Resources. These can be mailed or electronically sent from the University. All electronic requests should be sent to *HR@ucityschools.org.* The Assistant Superintendent for People and General Administration must receive advanced notice of electronic transcripts.
2. Human Resources will review all necessary documents to process the request. In the event that additional information is required, employees will be notified in ample time to be eligible for channel change request.
3. Human Resources will notify teachers of credit approval for college courses, Type II and Type III credit approval, no more than ten (10) business days after receiving the completed "Application for Approval of Courses" or "Professional Growth Credit" forms.
4. The Assistant Superintendent for People and General Administration will approve all eligible requests and then submit the requests to the Board of Education for approval. Staff will be notified within 10 business days of approval.
5. Once approved by the Board of Education, the employee will receive a letter notifying them of the approval and how to access the new contract.
6. Channel Change requests made by August 31 will be paid out by September 30 and the amount is divided over 22 pay periods.
7. Channel Change requests made by January 31 will be paid out by February 28 and the amount is divided over the remaining 12 pay periods.

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Channel Change & Salary Adjustment Request Form

Name:		**Date:**	
Title:		**Location:**	
Certified Staff Current Pay/Level/Step:		**Certified Staff Requested Pay/Level/Step:**	
Support Staff Salary Adjustment Current pay:		**Support Staff Requested Percent Salary adjustment :**	
Reason for the request:			
Transcripts Delivery Method:	☐ Mail	☐ Email	☐ Not applicable

Certified Staff: For a channel change to be effective for any given semester, this form along with the necessary degrees, hours, or credit must be submitted via official transcript and or approved district Type II or III forms to the Human Resources department no later than August 31 or January 31.

Please use multiple forms if needed

If the request is based on a combination of credits, please indicate how all credits were acquired:

Credit Type (University, Type 2, Type 3)	**Date Credit Earned**	**Course Number and Number of Credit hours received (I.E. 5000/3 hrs.)**	**Course Location**

Signature: _____ Date Submitted: _____

Assistant Sup. For People & General Admin.: _____ Date:_____

Human Resources ONLY		
Date Received:		☐ Approved ☐ Denied, reason:
Date Board Approved:		

Updated 8.19.19