TRACY UNIFIED SCHOOL DISTRICT

NON-TRADITIONAL UNITS OF CREDIT REQUEST FORM

Section below be completed by Employee.

Name		Date					
Current Assignment Grade Level							
I hereby request approval of the following as non-traditional units of credit towards salary placement							
Start Date	Anticipated	Course/ Workshop	Course/ Workshop Name of School or Ur		nits	Number of Class	
	Completion Date	Title	Other Sponsor	Semester	Quarter	Hours (if not units)	
Mandatory: Attach Supporting materials such as course/workshop description, brochure, etc.							
How will this course benefit you in the classroom?							
Approval for a plan of travel needs to be submitted prior to May 1 st and include the following: 1. Type of transportation, including stopping places, length of journey, etc. 2. Summary of studies or activities connect with the plan of travel. 3. Summary of how the tour will result in professional growth. I understand that: (a) Prior approval is required; (b) Transcripts and/or Travel Reports are due no later than September 1 st . Signature							
Signature			Date				
If disapproved, give reason(s):							
Type of Non-Traditi	onal Units	Previous U	Units Units in P	rogress	Curr	ent Units Approved*	
	ts (Max 5 in 15-unit bl	ock)					
Workshops/Seminar							
	8 each Sem./Max. 5 in	5					
years)							
Voc. Employment (N		- Evolution by Acces	into Superintendent f	or Uumar 1	Pagouraas		
*Pending Verification of Completion and/or Evaluation by Associate Superintendent for Human Resources							
For more information regarding Non-Traditional Units, please refer to Article XV from the TEA Agreement.							

Cc: Personnel File

