			Office Use:
Level:	From:	to	
Salary:	From:	\$ to \$	

CHANGE IN SALARY LEVEL REQUEST FORM PROFESSIONAL EMPLOYEES

I have completed the fo		uate courses and request a cha	ange in level of prep	paration from		
Additional courses comp	oleted to qua	lify for this change are listed b	pelow.			
College/University	Course #	Course Name	Date Completed	# of Credits		
Attached are UNOPENED, OFFICIAL SEALED TRANSCRIPTS, diplomas or other official records to verify this work.						
Name:						
Date		School				
Employees may change sa	lary level no r	permanent part of the Professio more than once in a District fisca ange of level request and suppor	ıl year. A change in s			

the day immediately following the Board meeting at which it is approved. This form must be accompanied by **UNOPENED, OFFICIAL SEALED TRANSCRIPTS**!

Official transcripts and/or other forms submitted elsewhere to obtain tuition reimbursement, etc.,

Once the District confirms receipt of all required documents the District will have a thirty (30) day period to process the change. The change will be submitted to the Board for approval at its next official meeting following the expiration of the thirty (30) day processing period. The updated salary will become effective

are not automatically registered with the Personnel Office. It is <u>your</u> responsibility to see that all of the above requirements are met.