REQUEST FOR GRADUATE PROGRAM APPROVAL

Program must be pre-approved when intending to use credits toward salary increases or when requesting reimbursement

(Please submit to Director of Teaching & Learning at the Business Office at least 2 weeks prior to start of program)

| Perso | n Making Request: | Building: | |
|-----------|----------------------------------|---|---|
| | PRO | GRAM INFORMATION | |
| 1. Nan | ne of Program | | |
| 2. Rela | ationship to Your Profession | nal Goals in our District: | |
| | ase attach an outline of prog | • | _ |
| Individ | dual credits taken within an ap | proved program do not need separate approval. | |
| 4. Uni | versity or Institution: | | |
| 5. App | proximate Start and End date | 9: | |
| 6. Tota | al Number of Credits to be E | arned: | |
| level c | redits that can be applied to th | rix, teaches may earn and accumulate up to 30 graduate neir salary. In order to move to Master + salary step (i.e. earned after receiving a masters degree. | |
| salary | | e reports with salary step request form when applying for invoice from the institution with the district expense form | |
| Signa | ture of Person Making Requ | est Date | |
| ==== | Do not wr | te below this line - Office use only) | = |
| | Request Approved | | |
| | Request Denied for the follow | ving reason(s): | |
| | | | |

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Signature of the Director of Instruction Date