

RED BLUFF JOINT UNION HIGH SCHOOL DISTRICT

Professional Salary Advancement
Application for Approval of Salary Schedule Units

Name: _____ Date Submitted: _____

College Major(s): _____ College Minor(s): _____

Teaching Assignment(s): _____

Course Title, Workshop: _____

Institution: _____ Course Number: _____

Date to be taken: _____

Units: Semester _____ Quarter _____ Hours of Participation _____

Each applicant is required to relate the proposed activity to personal professional goals or district need. Check one and explain how this proposed activity relates to the item checked. Please use an additional sheet if needed. Attach a syllabus or course description and include a grade card if completed.

_____ Personal Professional Goals _____ District Need

- | | | |
|--|--------|-------|
| 1. Has this course been taken previously? | ___Yes | ___No |
| 2. Was a substitute required? | ___Yes | ___No |
| 3. Did the district provide any reimbursement for your expenses? | ___Yes | ___No |
| 4. If you answered yes to number 3 above, attach an explanation. | | |

Any college course shall be accepted for credit provided it is in the teacher's major or minor field, or is in the subject area in the individual's current assignment. The course must be professionally applicable; areas of growth within the district would be EL, Special Education and socio-economically disadvantaged population. Courses outside a teacher's major or minor will be approved upon said subject authorization on the teacher's credential.

Please submit this application to the Director of Human Resources.

Approved _____ Disapproved _____

Director of Human Resources: _____ Date: _____

Comments: