REQUEST FOR SALARY TRACK CHANGE

**Please refer to your collective bargaining agreement for track change submission deadlines

NAME:		SCHOOL:	DATE:						
Anticipated Track Change:									
FROM	то	IN	Wear						
Please list ALL courses/credits (completed or anticipated) that will enable you to move on the salary schedule:									
Date of Course	College	Course # & I	Name # of Credits						
	•		TOTAL CREDITS						

NOTE: This section is only for Districts entitled to an additional JANUARY TRACK CHANGE in the same year. *I am also taking the following courses(s) which will enable me to move on the salary schedule from:*

		то	IN JANUARY			
	Track		Track		Year	
Date of Course	College		Course #	[£] & Name	# of Credit	ts

EMPLOYEE SIGNATURE: _____

FOR OFFICE USE ONLY	DATE RECEIVED:				
Your request for a track change(s) to in Track (s) Month/Year has been received. FINAL APPROVAL CONTINGENT UPON receipt of an OFFICIAL TRANSCRIPTS(s) and the terms of a current collective bargaining agreement.					

DATE: