

APPLICATION FOR HORIZONTAL MOVEMENT ON SALARY SCHEDULE BON HOMME SCHOOL DISTRICT #04-2

Name _____

I request salary movement from Lane _____ to Lane _____, effective September 1, _____.

Lanes: BA BA+8 BA+15 BA+30 BA+45 MA MA+8 MA+15 MA+30 MA+45 MA+50

I understand that I must meet the following conditions in order to qualify for the increase:

1. All college course work must contribute directly to the improvement of skills needed to perform the employee's specific duties for Bon Homme School District #04-2.
2. All work must be taken at an accredited college or university.
3. Employees who anticipate horizontal movement must notify the District Office by April 1st of the year preceding movement. Complete transcripts of all credits earned must be filed by September 10th with the superintendent.
4. All courses which the teacher wishes to use for horizontal movement on the salary grid must be approved in advance by the superintendent. Requests for approval must be made on forms provided by the District and must be submitted prior to registration for the course. The superintendent will act upon the requests within (5) five days of receipt. The superintendent may approve courses that are: 1) part of an approved graduate degree program, or 2) related directly to the teacher's teaching assignment or area of certification, or 3) that will directly benefit the District.
5. When teachers are horizontally advanced, only those credit hours earned since the last advancement will be evaluated by the superintendent. Original placement will require that all hours beyond the BA be evaluated.
6. When a teacher is enrolled in a graduate degree program and seeks to advance on the salary grid, those hours taken beyond the requirements of the MA will count toward horizontal movement on the salary grid.

Graduate Hours earned over the BA or BS Degree must be on the graduate level and be either in education or in the teacher's teaching area. These hours are to be evaluated by the superintendent.

Courses taken since the last salary schedule advancement

College/University	Course No	Title	Date	Credit	*GC	**OT
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

*Graduate credit form on file in District Office

**Official transcripts on file in District Office

Teacher

Date

For Business Office Use Only:

_____ Units have been verified by official transcripts on file.

_____ Units will be required to be verified by transcripts on/before September 10th.

Superintendent/Secondary Principal

Date

From Lane _____ to Lane _____ \$ _____