



CREDIT APPROVAL FORM

Application to apply credits earned after September 1, 1995
to Wenatchee School District's Salary Schedule.

The 1995 State Legislature has mandated that credits (including clock hours) earned after September 1, 1995, shall count **only** if the content of the course meets one or more of the state-defined criteria listed in **Section 4** below. It is necessary to complete this form and establish eligibility before any credits earned after September 1, 1995, will be accepted for district salary placement. A separate form is required for each transcript or clock hour activity.

Section 1

Employee Requesting Salary Schedule Placement

Name: _____ Location: _____
 Address: _____
 _____ Position: _____ FTE: _____

Section 2

College Credits/Clock Hours

1. Course Title(s): _____
 2. Credit/Sponsoring Provider: _____
(MUST be an accredited college or university or approved provider or will not be recognized)
 3. Date Awarded by Registrar/Date of Attendance: _____ # of Quarter Hour/Clock Hour Credits: _____

Section 3

Conference/Workshop

Date of Conference/Workshop: _____ Sponsoring Group: _____
 Title of Conference/Workshop: _____
 # of Quarter Hour/Clock Hour Credits: _____

Do you need a substitute?: Yes/No
 If yes, do you need: full day sub/½ day sub
 If yes, who is paying for your sub? PGO/Tuition Reimbursement (only for 13+)/Bld/ _____ (other)
 Budget Code: _____

Amount of funds available based on experience placement on WSD salary schedule (Part-time employees are pro-rated to their FTE):

- 0-6 years of experience – \$900.00 per year*, no carry forward – for conference/workshop that aligns with District goals**.
- 7-12 years of experience - \$600.00 per year*, no carry forward – for conference/workshop that aligns with District goals**.
- 13+ years of experience - \$450.00 per year*, 1 year carry fwd up to a \$900 maximum for conference/workshop that aligns with District goals**, including materials purchased at conference/workshop that are directly related to the conference/workshop and travel (lodging, mileage, meals).

Section 4

Certification (state-defined criteria: MUST meet one or more of the following):

I hereby certify that the content of the course(s) in which the above described credits were earned is:

- Consistent with a school-based plan for mastery of student learning goals as referenced in RCW 28A.320.205, the annual school performance report, for the school in which the individual is assigned;
- Pertains to an individual's current assignment or expected assignment for the subsequent school year;
- Is necessary to obtain an endorsement as prescribed by the state board of education;
- Is specifically required to obtain advanced levels of certification; or
- Is included in a college or university degree program that pertains to the individual's current assignment, or potential future assignment, as a certificated instructional staff.

Section 5

Request for Tuition Reimbursement

TOTAL reimbursement claimed: \$ _____

Attached is the required documentation for tuition reimbursement for the _____ school year (September 1 – August 31 and turned into HR prior to September 15 of the following school year).

Submit this form to the HR Dept with copies of: grade report(s) / clock hour completion form / transcripts / certificate of attendance **AND** receipt.

Employee's Signature _____

Date _____

Supervisor's Signature _____

Date _____