

Teacher Application for Salary Lane Change



TEACHER INFORMATION (PLEASE PRINT)

Name	Employee ID #	Phone
Address	City	Zip
Present Assignment	School/Dept	
Initial Teaching Certificate: Type	Year Received	State
Employee Signature	Date	

APPLYING FOR

***LIST CREDITS ON BACK OF THIS FORM**

☐ B + 20* ☐ B + 40* ☐ Masters (Degree) ☐ Masters (Equivalency) ☐ M + 20* ☐ M + 40* ☐ PhD

LANE CHANGE APPLICATION GUIDELINES

- LANE CHANGE ADJUSTMENTS will be effective the first day of the teacher's contract year providing the credits are appropriately documented in Human Resources between May 15th and September 15th.
- LANE CHANGE ADJUSTMENTS requested between September 16th and June 1st will be effective the first day of the month following approval. Such requests must be filed by 5:00 pm the fifth day of the month in order to be processed for approval. If the fifth falls on a weekend or holiday, applications must be received by the last working day before the fifth.
- If the information is missing or incomplete (OFFICIAL TRANSCRIPTS or other acceptable documentation), the application will be returned unapproved.

☐ RETURNED UNAPPROVED

Date Returned	Reason
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☐ APPROVED

Human Resources Administrator Signature	Date
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Please study your paycheck of _____ to see that the appropriate salary adjustment is made effective _____.

STEP _____ LANE _____ ANNUAL SALARY \$ _____

- Hours submitted must be at least 20 semester hours, which is equal to 30 quarter hours.
- Attach official transcripts for all university/college courses.
- Attach original/official **documentation** for all other courses.
- Do not list any courses that have been used for a previous lane change.
- **Attach documentation in the same order in which the courses are listed below.**

[illegible]

TOTAL SEMESTER HOURS: