



OFFICE PROFESSIONALS INCENTIVE PROGRAM Level Change Application

Name: _____ District ID#: _____

School/Department: _____

Job Assignment: _____

I am applying for: Level 1 Level 2 Level 3 Level 4

Date of Office Professionals Employment Contract: _____

List all courses/workshops applicable to this application. Credit earned prior to July 1, 1981 cannot be used.

	Date Earned	Name of Course/Workshop	Approved by	Semester Credit Earned*
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

*See Credit Conversion Table on the "OPIP District Guidelines" document.

This application must include documentation of individual course/workshop approval and verification of completion for all courses/workshops listed above. Official transcripts or certificates are appropriate forms of verification (including MIDAS transcript). **Submit directly to Human Resource Services.**

Employee's Signature Date

Credit Approval – Office Use Only

Reviewed by: _____	Date: _____
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