Mt. San Jacinto College District

Certificated Application for Course Approval
For Salary Schedule Advancement

Name_____ Date _____

Course Number & Title _____

Number of Units _____ Semester_____ or Quarter_____

Dates: Starting _____ Ending _____

Institution Offering Course_____

How does this course apply to the criteria set forth in the Employer-Employee agreement?
(check one and explain below)

O Advanced degree in assigned teaching area

O Advanced degree which clearly enhances teaching or assigned area

O Units at any level that can be clearly illustrated as being a direct enhancement to teaching or assigned area *(Refer to VII C4c of the faculty contract for limitation)*

O Equivalent credit as described in article VII B2c of the Faculty Contract*
**What reasonable efforts have you made to obtain approval for units from an accredited institution? (Attach an extra sheet if necessary.)*

_____

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Note: Please attach course/program description
Have you received salary schedule advancement for this course before? _____

If so, please explain_____

Other information that applies to this particular request _____

_____

Employee Signature: _____Date:_____

Signature: _____Date:_____
Appropriate Dean (acknowledgement of course application)
***Check deadline dates** *CTA Contract* ***Check if your school is accredited** *Directory of Accredited Colleges*

For Committee Use Only

_____Approval _____Denial Date_____

Comments_____

_____

_____
Committee Chair

_____Approved _____Disapproved

_____
Superintendent or Designee

White —Salary Advancement, Canary —Human Resources, Pink —Applicant
8/03 HR 406