

PRE-APPROVAL FORM FOR GRADUATE CREDIT

TO: SUPERINTENDENT

NAME:

DATE:

I am planning to enroll for the following college course (**500 level or above**) for credit. I would like to use the semester hour(s) credit for increased salary on the District salary schedule.

COLLEGE/UNIVERSITY

COURSE TITLE

COURSE NUMBER

Please give a brief description of how this course will enhance your teaching and which standards it will address.

This course has been APPROVED / DENIED for salary schedule increase purposes.

COMMENTS:

Principal

DATE

Superintendent

DATE