Change in Rank/Licensure

Complete and submit this form to the Superintendent at least two (2) weeks prior to the beginning of the affected school term. Attach documentation verifying your change in rank/licensure.

Employee's Name:	
Employee's Classification: 🛛 CERTIFIED	CLASSIFIED
School/Work Location:	
Immediate Supervisor's Name:	

My rank/licensure will change from _____

to _____

effective for the ______ school year. Attached is the required documentation to

verify my rank/licensure change.

TEACHERS ONLY

□ National Board Certification is pending. Pursuant to policy 03.121, I am providing this notice prior to September 15 in the event a rank-related increase in salary is indicated.

Employee's Signature

Superintendent's Signature

Date

Date

NOTE: Before salary adjustments can be made, documentation verifying change in rank/licensure must be received by the Superintendent and on file at the Central Office.

Review/Revised:11/10/2003