

IRON COUNTY SCHOOL DISTRICT Policy Handbook	ICSD Code: GCL-E1
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IRON COUNTY SCHOOL DISTRICT APPLICATION FOR APPROVAL OF CREDIT

Date: _____ Name: _____

School: _____ Address: _____

I hereby request Lane Change Credit for the following classes or workshops. **I understand that approval must be obtained prior to taking the classes or workshops.** If approved, the credit will apply towards advanced steps on the salary schedule upon completion of the classes or workshops. **Credit will only be issued after verification of workshop, course etc.** I have read the policy on credit in the policy handbook. (Policy GCL)

Course Number	Course Name	Up. Div Credit 3000-4000	Graduate Credit 5000 Quarter	Graduate Credit 6000 Semester	Workshop Credit	Where Taken	Date Taken	Date Completed

Approval: *Note: If you are applying to have workshop credit or upper division credit count as graduate credit, please fill out the form on the back and get approval from the superintendent. **One semester hour is equivalent to 1.5-quarter hours on the salary schedule. Please be aware that 10 clock hours of workshop participation equals 1-quarter credit on the salary schedule.

Date: _____

Signature of Principal

Date: _____

Signature of District Director

Certificate of Completion		
This is to certify that _____ has successfully completed the inservice and/or workshop study and is entitled to credit based on the number of hours the workshop was held. (10 clock hours = quarter credit)		
Inclusive dates of workshop	Total hours of workshop	Signature of instructor conducting workshop certifying