

APPROVAL FOR IN-SERVICE CREDIT

TO: SUPERINTENDENT OF SCHOOLS

FROM: _____ / _____
Teacher's Name Signature

DATE: _____

I would like to register for the in-service training indicated below and am requesting approval for that course to be credited toward my accumulated in-service hours for advancement on our salary schedule when successfully completed. My certificate of participation will be provided to confirm completion.

College/University/Center: _____

Clock Hours: _____ (Please attach a copy of the course description)

Dates attending: _____

I am interested in taking this course because it relates to my current role in education as follows:

*****FOR CENTRAL OFFICE USE*****

This course is **approved/denied** for in-service credit toward your salary advancement.

If credit is denied, the reason is: _____

Superintendent's Signature: _____ Date: _____

TO: Teacher Requesting Approval

FROM: Superintendent of Schools

*Please sign, date, and return a copy of this approval when you have **successfully completed** this training.*

Teacher's Signature: _____ Date: _____