

**APPENDIX D  
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. I will not submit a timesheet to be paid for this training. 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:

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**\*\*\*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: \_\_\_\_\_

For In-Service recorded in My Learning Plan, instructor attendance verification will be used. For In-Service not in My Learning Plan, a copy of a name tag, or a certificate of completion must be turned in to verify attendance.