ROCKLAND BOCES
BOARD OF COOPERATIVE EDUCATIONAL SERVICES

65 Parrott Road, West Nyack, NY 10994-0607
www.ROCKLANDBOCES.ORG

SUBMIT TO PERSONNEL OFFICE WELL IN ADVANCE OF EFFECTIVE DATE

REQUEST FOR SALARY CHANGE BECAUSE OF ADDITIONAL EDUCATIONAL CREDITS

Present status on salary schedule _____ _____
Step Degree and credits

Salary change request _____ _____
Step Degree and credits

List credits which pertain to this salary increase. COURSE NUMBER **MUST** match number on transcript or form will be returned.

Course Name	Course Number	Dates	Number of Credit Hours	Name of Institution
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Attach or send **OFFICIAL TRANSCRIPTS** to verify the above.
OFFICIAL TRANSCRIPTS must be received by Personnel Office by October 1st to be effective September 1st and by March 1st to be effective by February 1st.

Date _____ Teacher's Name _____

_____ _____
Executive Director of Human Resources Date

_____
Effective Date

8/21/13
Request Salary Change.docx