

Application for Course Approval
For Salary Schedule Advancement

Office of the Superintendent
Norfolk Public Schools, Norfolk, Nebraska

NOTE:

- ✓ Please use a separate form for each course approval request.
- ✓ **Requests must be submitted to the superintendent's office at *least 10 days* prior to the start of the course.**
- ✓ Approval/Disapproval will be emailed back to you.

Today's Date: _____

Last Name: _____ First Name: _____

Teaching Assignment/Position: _____

Building(s): _____

Current Education Level (Circle one): Bachelor's Degree Master's Degree

If approved, this class will take me to _____ hours past my Bachelor's Degree OR
_____ hours past my Master's Degree

COURSE INFORMATION:

College/University: _____

Course Number: _____ Start Date: _____ Number of Credit Hours: _____

Course Title: _____

Brief Course Description:

How will this course help you and your students?

Staff Member's Signature: _____

Please email approval/disapproval confirmation to: _____

Teachers are expected to provide the Superintendent with an official transcript for all graduate hours earned for purposes of advancement on the salary schedule on or before September 1st. See the Certified Handbook for more detailed information.

THE FOLLOWING IS FOR SUPERINTENDENT USE ONLY

Approval Signature: _____ Date: _____

Disapproval Signature: _____ Date: _____

Reason for disapproval or other comments: