

**FORM B**  
**TEACHER APPLICATION FOR MOVEMENT ON SALARY SCHEDULE**  
**CREDITS ABOVE MA+60**

NAME \_\_\_\_\_ SCHOOL \_\_\_\_\_ ASSIGNMENT \_\_\_\_\_

I hereby apply for movement on the salary schedule from \_\_\_\_\_ to \_\_\_\_\_ based on  
 degree degree

satisfactory completion of the courses I have listed below. In order to be eligible for consideration, I understand that I must provide **OFFICIAL TRANSCRIPTS** for all courses listed. Credits so earned must be graduate credits in the teacher's area of responsibility, a pedagogical NYSUT/Teacher Center course, or a district sponsored in-service course approved by the Superintendent/designee. **I have attached a copy of the My Learning Plan application with final approval status marked complete.** (Please see Contract Agreement, Article VIII for further clarification.)

**NOTE:** Credit will be applied on the base salary once per annum. A completed application must be submitted by October 1 for payment to be retroactive to July 1.

NAME OF COURSE	OFFICIAL COURSE No.	INSTITUTION	CREDITS	TERM/YEAR

Teacher Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

**Office Use Only**  
**To the Teacher**

Your application for movement on the salary schedule from \_\_\_\_\_ (step/degree) to \_\_\_\_\_ (step/degree) has been approved. Accordingly, your annual salary will be increased from:

\$ \_\_\_\_\_ to \$ \_\_\_\_\_

(credits) \_\_\_\_\_

(longevity) \_\_\_\_\_

**Total** \$ \_\_\_\_\_ to \$ \_\_\_\_\_ effective \_\_\_\_\_. Congratulations!

\_\_\_\_\_  
 Signature of Superintendent or Designee

\_\_\_\_\_  
 Date

Central Office Check: \$ \_\_\_\_\_