Change in Rank/Licensure

Complete and submit this form to the Superintendent at least two (2) weeks prior to the beginning of the fall term. Attach documentation verifying your change in rank/licensure.

Superintendent's Signature		Date	
Employee's Signature		Date	
□ National Board Certification is pending. Pur rank-related increase in salary is indicated.	rsuant to policy 03.12	1, I am providing this notic	e prior to September 15 in the event o
Teachers Only			
theschool year. Attached	is the required docume	entation to verify my rank/li	effective for the fall term of gensure change.
My rank/licensure will change from		······	
IMMEDIATE	SUPERVISOR'S		NAME
SCHOOL/WORK			LOCATION
EMPLOYEE'S CLASSIFICATION	☐ Certified	☐ Classified	
EMPLOYEE'S			NAME

Note: Before salary adjustments can be made, documentation verifying change in rank/licensure must be received by the superintendent and Placed on File at the Central Office.