

Application for Approval of Certificated Professional Growth Units

Human Resources (714) 424-8935 Directions: Complete the <u>entire</u> form. Submit to: Human Resources: Professional Growth Committee

Step 1			
	Check if you are a new hire to N-MUSD		
	Date:	ID#	
	Last Name:	First Name:	
	Site:	_ Grade/Subject:	

Step 2

A PHOTOCOPY OF THE COURSE OR WORKSHOP DESCRIPTION MUST BE ATTACHED TO ALL PROFESSIONAL GROWTH APPLICATIONS

Workshop or Cours	se Provider:			
Course Title:			Course Number:	
Course Start Date:			Course End Date:	
Units:	(Check one)	Semester	Quarter	
If <u>not</u> a college clas	s, enter attendan	ce hours (15 hours	= 1 semester unit):	
Briefly define how	this experience w	ill help you to grow	professionally:	

Step 3

Retain a copy and send application to: Human Resources, Attention: Professional Growth Upon completion of this course or workshop, send in a transcript, or grade card, with a copy of your approval to Human Resources. If this course or workshop will allow you to move on the salary schedule, verification must be received by October 1st. If a stipend is received, District paid, or you attend during a contractual work day, you cannot use hours for N-MUSD Professional Growth.

Professional Growth Committee Action	Funding Source:			
Date:				
Approved – Meets compliance with the criteria, rules				
and regulations established by the agreement between N-MUSD				
and NMFT				
Not Approved for the following reason(s):	Application return for following			
Course or Workshop taken during contractual work day.	No Course Description			
Course or Workshop was taken without prior approval.	Application is incomplete			
Course or Workshop is not applicable to assignment.				
Stipend received/District paid for workshop.				