

TALLMADGE CITY SCHOOLS

REQUEST FOR CHANGE OF TRAINING BRACKET

(Salary Schedule Change Due to Additional Training)

Note: An official transcript of credits must be on file in the Central Office by September 15th for you to receive credit for additional hours on the salary schedule.

Name _____

Address _____

Telephone _____

Additional Training:

Date	Institute	Course	Credit
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The above additional training places me in the _____ training bracket on the salary schedule.

Date: _____ Signed _____

Approval signature _____

Date: _____