



GENERAL McLANE SCHOOL DISTRICT

NOTIFICATION FOR LATERAL MOVEMENT ON SALARY SCHEDULE

I, _____, hereby certify that I have received additional credits entitling me to receive additional compensation for lateral movement on the salary schedule in accordance with the terms and conditions of the Teacher Agreement. I have attached copies of my transcript(s).

SIGNATURE: _____

DATE: _____

APPROVED _____

SALARY LEVEL:

BA + 15 _____

MA or Equivalency _____

MA or Equivalency + 15 _____

MA or Equivalency + 30 _____

MA or Equivalency + 45 _____

Doctorate _____

EFFECTIVE DATE: _____

COPIES TO:

Payroll _____

Personnel File _____