



Shakopee Public Schools

COURSE COMPLETION/LANE CHANGE FORM

For Licensed Staff

NAME _____ ID# _____
 BUILDING _____
 CURRENT STEP _____ & LANE _____

FOR OFFICE USE ONLY

Date Received: _____

INSTRUCTIONS: Complete all areas below. All courses/programs must have been PREVIOUSLY approved by HR.

THIS REQUEST INCLUDES INFORMATION FOR...
(Check all applicable boxes.)

- Course Completion.** Attach grade report and/or official transcript.
- A Non-Degree Lane Change.** An unofficial transcript will suffice.
- A Lane Change Due to a New Master's, Specialist, or Doctoral DEGREE (not certifications).** An official transcript is required.

Total # of Pages (including this form and supporting materials): _____

EXPECTED LANE CHANGE	I believe that these <i>(number)</i> credits will move me <i>FROM</i> the _____ lane <i>TO</i> the _____ lane.
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CONTRACTUAL REQUIREMENTS: Credits to apply to lanes beyond a particular lane must be earned subsequent to the earning of the degree, and must be taken from an accredited college or university. College credits not accepted by the granting institution for their own graduate programs shall not be applied to lane changes.

TIMELINE: Individual contracts will be modified to reflect qualified lane changes effective the first of the month following the month in which the teacher submits complete paperwork which demonstrates satisfactory evidence of completion of the requirements for the lane change to the Human Resources Office.

SESSION DATES (begin – end)	COURSE #	COURSE TITLE	UNIVERSITY OR COLLEGE	GRAD Level (Y or N)	GRADE	# of SEMESTER CREDITS	IN FIELD? (Y or N)

LICENSED STAFF SIGNATURE /s/ **DATE** _____
The /s/ before your typed name indicates that you agree that this typed name is in lieu of your legal and authorized signature and carries the same legal weight.

SUBMISSION: Please **SCAN AND EMAIL** this form and any supporting documents to cgregory@shakopee.k12.mn.us

Below this Line — FOR OFFICE USE ONLY

Total Credits: _____

Qualifies for a lane change as follows...

Original Lane _____

New Lane _____

Current Step _____

New Annual Salary: _____
Prorated for portion of contract year remaining at time of lane change.

Effective Date: _____
COMMENTS:

_____ _____
Human Resources Signature *Date of Approval*