

Kankakee School District 111
Department of Human Resources
SALARY CHANGE REQUEST

Employee Name (Please Print): _____
Last First Middle I Last 4 SSN

School: _____ Position: _____ School Year: _____

NOTE: Advances on the salary schedule will be considered with receipt of the following:

1. Pre-approved **NOTICE OF ADVANCED TRAINING COMPLETION** form
2. Original/official transcripts from accredited college/university
3. Copy of new registered certificate (if warranted by degree)

Current Degree Position

(check one)

- Bachelor's
- Bachelor's +15
- 1st Master's
- Master's +15
- 2nd Master's
- Doctoral Degree
- Other Degree

Degree Program Completion

*(for requested salary increase)**

- Bachelor's
- Bachelor's +15
- 1st Master's
- Master's +15
- 2nd Master's
- Doctoral Degree
- Other Degree

Degree/Coursework as noted above was completed (date): _____

Transcripts

Transcripts for coursework as noted above (check one):

- ... are on file in the Human Resources Department
- ... have been ordered for submittal to Human Resources Department / Order Date: _____
Name of College/University: _____

Employee Signature Date

***Salary Increase Deadlines:**

1st Semester Increases: Requests must be received by _____. Program Completion Required by _____.

2nd Semester Increases: Requests must be received by _____. Program Completion Required by _____.

FOR HUMAN RESOURCES USE ONLY - DO NOT WRITE BELOW THIS LINE

Salary Increase From: \$ _____ To: \$ _____ Effective Date: _____

HR Initials

APPROVAL:

Assistant Superintendent, Human Resources Date