<u>RIALTO UNIFIED SCHOOL DISTRICT</u> Personnel Services Department 182 E. Walnut Avenue Rialto, CA 92376

APPLICATION FOR CLASSIFIED PROFESSIONAL GROWTH CREDIT

Employe	e's Name		Date
Mailing	Address		Social Security Number
City	State	Zip	Social Security Number
			Date of Hire
Position	and Work Site		

Date Received in Personnel Services

I hereby request approval of the following course(s) for credit toward my Professional Growth increment. I understand that is my responsibility to submit this request <u>prior</u> to the date the class first meets.

Section/Course Number	Start Date	Course Title and/or Description	College or School	Number of Units (quarter or semester)
Example: SCI/20	05/04/99	Science I (Intro to Biology)	CSUSB	4 quarter units

If a line appears through any course you have submitted, the course is not approved for Professional Growth.

Courses not approved.

Reviewer's initials

Under the terms of the current Classified contract, you may file an appeal on any course denial. The appeal must be filed within 10 days, in the Personnel Services Office. The appeal should set forth the reasons for disagreeing with the denial. It would be appropriate to review the contract language on pages 54 and 55 prior to writing your appeal.

An appeal form is enclosed for your convenience.

Reviewer's initials

Courses approved. When the approved courses are completed, it is your responsibility to submit an *official transcript* to the Personnel Services Office. "Kiosk" and/or internet printouts are not considered to be valid forms of grade reporting, for professional growth purposes. Under the terms of the current Classified contract, you will be eligible to receive each professional growth increment upon completion of 12 semester units. Please refer to

pages 54 and 55 of the contract to further information pertinent to professional growth.