



Carle Place Union Free School District

168 Cherry Lane, Carle Place, New York 11514-1788

REQUEST FOR CHANGE OF

SALARY DEADLINE: FEBRUARY 1

NAME: _____ SCHOOL: _____

Your Current Scale and Step: _____ Current Salary: _____

Request to Change to: _____ \$ _____
New Scale and Step New Salary

If Applicable, amount of current Longevity increment: _____

Date of Hire: _____

"REQUEST FOR APPROVAL OF IN-SERVICE/GRADUATE COURSES" and all attendance records/transcripts must be on file **prior to February 1** in the Personnel Office **BEFORE** this form is submitted.

CAT#	Course Name	Institution	Completion Date	# Credit (s)

Signature

Date

Deputy Superintendent Signature

Date