

Teacher Name \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Date Submitted \_\_\_\_\_

Current Salary \_\_\_\_\_  
School Year \_\_\_\_\_  
Total Units \_\_\_\_\_  
(Submitted at this time)

HR Verification: \_\_\_\_\_  
Date Approved: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Placement on Salary Schedule: \_\_\_\_\_

**FINAL RECORD OF UNITS EARNED FOR ADVANCEMENT ON SALARY SCHEDULE**

School Year: \_\_\_\_\_  
# Units: \_\_\_\_\_  
Admin. Sig. \_\_\_\_\_  
School: \_\_\_\_\_

School Year: \_\_\_\_\_  
# Units: \_\_\_\_\_  
Admin. Sig. \_\_\_\_\_  
School: \_\_\_\_\_

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# Units: \_\_\_\_\_  
Admin. Sig. \_\_\_\_\_  
School: \_\_\_\_\_

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# Units: \_\_\_\_\_  
Admin. Sig. \_\_\_\_\_  
School: \_\_\_\_\_

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# Units: \_\_\_\_\_  
Admin. Sig. \_\_\_\_\_  
School: \_\_\_\_\_

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Admin. Sig. \_\_\_\_\_  
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Admin. Sig. \_\_\_\_\_  
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Admin. Sig. \_\_\_\_\_  
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Admin. Sig. \_\_\_\_\_  
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# Units: \_\_\_\_\_  
Admin. Sig. \_\_\_\_\_  
School: \_\_\_\_\_

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# Units: \_\_\_\_\_  
Admin. Sig. \_\_\_\_\_  
School: \_\_\_\_\_

**Please Note:**

**This page must be submitted to Human Resources for “Block” advancement on the teacher salary schedule. Maintain a copy of the completed document for your personal file and forward a copy to your Building Administrator.**

**No artifacts are to be attached to this sheet.**

**IT IS THE TEACHER’S RESPONSIBILITY TO MAINTAIN THIS FORM UNTIL S/HE HAS ACCUMULATED ALL THE UNITS NECESSARY FOR ADVANCEMENT TO THE NEXT BLOCK**