

Request for Salary Advancement  
Intent to Enroll/Reimbursement Request

Name \_\_\_\_\_ Date \_\_\_\_\_

Current Salary step \_\_\_\_\_ Requested Salary step \_\_\_\_\_

Number of hours to be taken \_\_\_\_\_

Course Title \_\_\_\_\_

Course description (from college or university) \_\_\_\_\_

How related to work at BHCC: \_\_\_\_\_

Staff signature \_\_\_\_\_ Date \_\_\_\_\_

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Course work will apply/not apply for advancement on the Big Horn Basin  
Children's Center salary schedule.

Number of semester hours approved \_\_\_\_\_,

Amount of Reimbursement \$ \_\_\_\_\_

Advancement to Step \_\_\_\_\_.

Will be approved/will not be approved for the \_\_\_\_\_ school year.

NW BOCES will approve for advancement on Salary Schedule and/or  
reimbursement of \$ \_\_\_\_\_ upon completion of course, submission  
of grade sheet, and re-submission of a copy of this form to the  
Administrative Director with attached documentation.

Administrative Director \_\_\_\_\_ Date \_\_\_\_\_

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