

REQUEST FOR HORIZONTAL MOVEMENT ON THE ESU 6 SALARY SCHEDULE

Name _____

Current Placement on Salary Schedule _____

New Placement on Salary Schedule _____

Please record the credit hours for which you are requesting horizontal movement on the salary schedule. Include the name of the course and the date completed.

Number of Credit Hours	Course(s) Taken	Date(s) Completed

Please attach transcripts for credit hours for which you are requesting horizontal movement.

Teacher's Signature

Date

Administrator's Signature

Date

*Mail form by **September 10th** to: Vicki Taylor, ESU 6, 210 5th St., Milford, NE 68405*