

CLASSIFIED NOTICE OF INTENT – PROFESSIONAL GROWTH (See CSEA Contract, Article 10)

	Date:
Name:	Job Title:
I intend to complete 12 semester units school year.	toward a professional growth increment for the <u>2019-2020</u>
Present Increment Level (1-5)	Proposed Increment Level (1-5)
	d CSEA Professional Growth Plan Approval Form on file ent and only those classes with prior approval will apply
	Human Resources Department by June 30 of the current al growth increment for the upcoming school year.
September 1 st . If such verification is made to the employee. Coursework v	ust be filed with the Human Resources Department by a not received by September 1 st , no new payments will be verified after September 1 st will be carried over to the next towth will begin July 1 st for 12-month employees and
Coursework verification from cours professional growth increment.	ses more than one year old will not count toward a
Signature	Date
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This section is for Human Resources I	Department use only.
Date Received:	Received By: