



Somerset Public Schools
Somerset Berkley Regional School District
All Students Achieving Excellence

I am requesting a salary adjustment from _____, Step ___ to _____, Step ___ in accordance with the provisions of the Paraprofessional Contract, Section IX: Wages, Subsection 2. In order to be eligible you must have completed the Anticipated Salary Request form by December 15 of the year preceding the adjustment request.

The following courses, with appropriate documentation, are being submitted to support my request for a salary adjustment.

<i>University/College</i>	<i>Dept</i>	<i>Catalog</i>	<i>Title of Course</i>	<i>Year</i>	<i>Grade</i>	<i>Credit #</i>

Official college transcripts with official seal and/or official grade reports with official seal must accompany this request.

Name (please print): _____ Date: _____

Superintendent's Approval: _____ Date: _____

Effective Pay Date: _____