## SALINAS UNION HIGH SCHOOL DISTRICT HUMAN RESOURCES OFFICE

## REQUEST FOR APPROVAL OF COLLEGE/UNIVERSITY COURSES

Name (print)			Site:	SUBJECT TAUGHT:		
	Last	First				
	be counted for advanc pal and the Administrat		-	must have the prior appro	oval of the	
or university		_		ion of the course, I will ask I do not take the course I v	_	
Offic	cial Sealed Transcripts r	nust be sent	to Human Resou	urces no later than <u>Octobe</u>	er 1 <sup>st</sup>	
Course Number	Name of Course		of College or Jniversity	Fall, Winter, Spring, Summer & Year to be taken	Semester Units to be Taken	
Will these co	urses count toward you	r Credential?	? CIRCLE: YES /	NO Which Credential:_		
Employee's Signature:				Date:		
Principal's Signature:				Date:		
	RETURN COMI	PLETED FORI	M TO HUMAN RE	SOURCES OFFICE		
	-н	JMAN RESO	URCES TO COMP	LETE-		
Approved:	Denied:	Reason [	Denied:			
Signed:				Date:		
	Administrator – Huma	n Resources				
Posted by:				Date:		

Personnel Specialist – Human Resources