

**Yreka Union School District
Course Approval Request**

To: Professional Growth Committee

From: _____ Date of Request: _____

RE: Request for Course Approval

I hereby request that the following course be approved by the Professional Growth Committee:

Course Title: _____

Course Description: Please attach a course description to this form. **Requests without course descriptions attached will not be considered.**

Course Number: _____ Number of Units: _____
(Underline Quarter or Semester)

College or Institution: _____

Where Taken: _____

Dates of Course: From _____ to _____.

Reason(s) for Taking Class: _____

After completing information above, submit form to District Office for processing.

	Approved	Not Approved
_____ Chris Harris	<input type="checkbox"/>	<input type="checkbox"/>
_____ Dave Parsons	<input type="checkbox"/>	<input type="checkbox"/>
_____ Kelly Velarde	<input type="checkbox"/>	<input type="checkbox"/>
_____ Lynn Ayers	<input type="checkbox"/>	<input type="checkbox"/>

Please Note:

- Units to count toward professional growth advancement shall be any units pertinent to a teacher's position, upper division course, or graduate work. Identical courses repeated cannot be counted for advancement. A committee of two teachers and two administrators shall make all decisions on the acceptability of units, subject to approval by the Board.
- In order to assure course approval, course approval requests should be submitted prior to the beginning date of the course.
- Committee will act on request and return decision prior to beginning date of course.