Unit I Educational Salary Adjustment
College Credit

NAME:	HIRE DATE:

In the spaces below, please provide complete information on the college credits earned to satisfy the continuing education requirement. This page may be duplicated if needed. **Please type or print.**

I qualify for the following Education Salary Adjustment: _____

(List article number above)

	College Course Title	# College Credits	Date of Course
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
		0	
	TOTALS	**0**	

ADVISORY: In accordance with Public Act 96 of the Public Acts of 1995, it is a criminal offense to use or attempt to use a college, university or State Board of Education Continuing Education Unit transcript that is fraudulently obtained, forged, or fraudulent credentials for this purpose.

_____ _____

Signature of Unit I Member *Date*

_____ _____

Signature of Executive Director, Human Resources *Date*