



Lane Change Request Form

- Official **transcript** or copy of front and back of official transcript showing evidence of completion is **required**.
- To review your personnel file for pre-approvals, credits or information for this form, please contact HR for an appointment.
- Adjustment will appear on the pay-period following the pay period approval date during an effective contract period.
- Adjustment will appear on the pay-period following the contract ratification date, if contract is expired.
- An incomplete form will not be processed.
- Retain a copy of your submitted form for your records.

Teacher’s Printed Name: _____ **Date:** _____

Current Assignment and Building: _____ **Building** _____

I request a lane change from current Lane/Step (see Employee Access) ____/____ to new Lane/Step ____/____

LIST COURSE(S) TO BE INCLUDED IN THIS LANE CHANGE. For MA list award date in lieu of courses #, name, grade & credits.

College	Course#	Course Name	Grade	Credit Amt	Pre- Approval Date	
Carry Over Credits from last Lane Change						
Total Credits						

See Contract Language						
Article VI, Financial Considerations, Section 7 - Placement on Salary Schedule						
FOR HUMAN RESOURCES OFFICE USE ONLY						

Form Received Date: _____ **Transcript Received Date:** _____

Present Basic Salary:	\$	Salary At New Lane:	\$	Prorated Salary:	\$	Effective Date:	
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Request Approved By: _____ **Date Approved:** _____

Please email, fax or mail to Janna Johnson, Human Resources Assistant at the DSC