

Sonora Union High School District
100 School Street, Sonora CA 95370 || Phone (209) 532-5511 x111 || Fax (209) 532-4513

UB-HG CCBHF57H

Name _____ Bargaining Unit _____

Job Title (*Classified/Confidential*) _____

Coursework applicable to (*teaching area or job duty*) _____

Certificated: Major _____ Minor _____ Second Minor _____

Degree Sought (*if applicable*) Doctorate Masters Other _____

Course ID# (*if applicable*) _____ Course Title _____

Date(s) Course to be Taken _____ Quarter/Semester Fall
 Winter
 Spring
 Summer

Anticipated Units/Hours _____ Units Hours

Name of School Awarding Credits _____

Rationale if outside major/minor or job description:

Employee's Signature _____ DATE _____

Submittal Procedure

1. **A Units Contract MUST be completed PRIOR to taking the coursework or attending the workshop/conference.** Submit the completed units contract to your supervisor for approval, retaining the pink copy for your records. **Submit separate contracts for each course taken.**
2. When approved by your supervisor, the contract will be forwarded to the District Business Office. When approved by the Superintendent/Designee, the signed yellow copy will be returned to you for your records.
3. The signed white copy will be held in your file until the District Payroll Office receives a transcript or grade card indicating you have completed the approved coursework with a "C" or better. A certification of completion by the institution will be accepted for "other than school" coursework.
4. **Certificated:** The completed units will be credited to your records to be used for computing your advancement on the Certificated Salary Schedule. Units for advancement are computed as **Semester** units above your BA/BS.
Classified/Confidential: The coursework hours will be calculated and applied to your salary per your contract or handbook.

NOTE: If you decide at a later date not to take the courses which have been approved, please notify the District Payroll Office so that your Units Contract may be cancelled.

Supervisor's Approval _____ Date _____

Superintendent/Designee's Approval _____ Date _____

Superintendent/Designee's Denial _____ Date _____

Rationale for denial: