

Independent School District 138
Application for *Lane Change* on Salary Schedule

Name of applicant _____ Date submitted _____

Application is for change from Lane _____ to Lane _____.

Course No.	Course Name	Credits	College	Date Completed

Upon approval, the original of this form will be filed in the employee's personnel file.
 A copy will be sent to the employee.

Do not write below this line

Approved _____

Disapproved _____

Date of action _____

Superintendent's Signature _____