



TEACHING ASSISTANT - SALARY ADJUSTMENT

Name _____ School _____
(Print) Last Name / First Name

Certification: _____ Teaching Assistant _____ Level: _____

Type of Certification Continuing Permanent Expiration Date _____
Prior to 2/1/04

Are you presently enrolled in a New York State accredited university or college? Yes No

SALARY INFORMATION

Request for Salary Adjustment Must be substantiated by Official Transcripts

Present Salary Information: Lane _____ Step _____ Degree _____ \$ _____

Adjusted Salary Information: Lane _____ Step _____ Degree _____ \$ _____

Degrees Awarded: AA _____ Month/Year _____ College _____

BS _____ BA _____ Month/Year _____ College _____

BASIS FOR SALARY ADJUSTMENT

List All College or University Credits Earned

Credits	College or University	Date of Completion (Mo./Day/Yr.)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total College Credits

Signature of Teaching Assistant: _____ Date of Application _____

Address of Teaching Assistant: _____ Home Phone Number _____

DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF HUMAN RESOURCES USE ONLY

University Credits _____

Payroll No. _____

TOTAL CREDITS _____

Budget No. _____

Program No. _____

Placed on Step:

Lane: _____
Degree &
Credits: _____

Salary: \$ _____

Effective Date: _____

Longevity Differential: _____

TOTAL ADJUSTED SALARY: \$ _____

Transcript(s) Missing From _____ Teacher Assistant Notified / / Received / /