PLAINVIEW-OLD BETHPAGE CENTRAL SCHOOL DISTRICT

106 Washington Avenue Plainview, New York 11803

Office of Human Resources & Safety

Christopher Donarummo, Assistant Superintendent for HR & Safety

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Excellence

TO: **Christopher Donarummo**

FROM: _____ _____
PRINT NAME **SIGNATURE**

DATE: _____ **BUILDING** _____

SUBJECT: **SALARY LANE CHANGE FOR**

Please circle one **SEPTMEBER 1ST (courses need to completed by 8/31 for September lane change)**
OR
FEBRUARY 1ST - (courses need to completed by 1/31 for February lane change)

(Memo must be sent NO LATER THAN Sept. 10th by and NO LATER THAN Feb. 10th)

I am requesting a lane change from _____ to _____.

Listed below are the courses I have completed. I will submit the **original in-service certificates** and/or **official graduate transcripts in sealed-stamped college/university envelope** to your office. I have also marked the courses completed in My Learning Plan.

NAME OF COURSE	COLLEGE/ UNIVERSITY	IN -SERVICE CERTIFICATE BEING SENT	TRANSCRIPT BEING SENT	TOTAL CREDITS