

TO: Payroll Office  
RE: Teacher Salary Adjustment

Please accept the enclosed transcripts as proof of completion of course work or college credit required to move up a level on the Allegan Education Association salary schedule.

Teacher's Name: \_\_\_\_\_

Current Salary Level (circle one):

BA            BA+18            MA            MA+15

Move to Salary Level (circle one):

BA            BA+18            MA            MA+15

Effective Date: \_\_\_\_\_  
(Sept 1<sup>st</sup> or January 15<sup>th</sup>)

Teacher's Signature: \_\_\_\_\_