

COMMACK PUBLIC SCHOOLS
COMMACK, NEW YORK

APPLICATION FOR SALARY INCREMENT
BASED ON ADDITIONAL CREDITS

BOARD OF EDUCATION/CTA AGREEMENT
July 1, 2003 – June 30, 2008

Teacher's Name _____ Date _____

Home Address _____

Telephone _____ E-mail Address _____

Current District Placement _____

The () completion () re-evaluation of _____ credits on: (month, day, year) _____
has made me eligible for a change in salary classification.

My present classification is (degree) _____ (credit) _____ (column) _____ (step) _____

My projected classification is (degree) _____ (credit) _____ (column) _____ (step) _____

On (month, day, year) _____ I requested that an **OFFICIAL TRANSCRIPT** of my
credits be sent to the Commack Public Schools, Assistant to the Superintendent, P.O. Box 150,
Commack, New York 11725, from:

_____ (phone) _____
(college)

**"All column changes achieved during the period of September 1st through August 31st will
be applied toward proper column placement as of September 1st of the following school
year." (Appendix C. Art. 5 Board of Education/CTA Agreement, 2003-2008)**

*All teachers are advised to review Salary Features, Appendix C, Articles 1 – 24 (especially 2b
& 23) in the CTA Agreement, for salary increment guidelines that may be applicable to you.*

Teacher Signature _____ Assistant to the Superintendent for Personnel

Approved: (degree) _____ (credits) _____ (column) _____ (step) _____

Date Approved: _____ Official Signature _____

Base Salary _____ Effective Date: _____ Initials _____