DIVISION OF HUMAN RESOURCES

Fresno Unified School District

# CERTIFICATED POST-BACCALAUREATE UNITS for SALARY ADVANCEMENT

**Due Date: August 30**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Employee ID Number:** |  |
| **Position Title:** |  | **Site/Dept:** |  |
| **Date Submitted:** |  | **Credential Status (PIP, STSP, COVID WAIVER, PRELIM OR CLEAR):** | |

For Post-Baccalaureate Credit: Only Earned Credits in your subject area will be honored.

Please see Collective Bargaining Agreement for additional

information. ***Transcript(s) must accompany request Form.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **College/School Institution** | **Course** | **Dates Taken** | **Quarter or Semester Units** | **Units Earned** |
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| **TOTAL UNITS:** | | | |  |

Check the appropriate submission (if applicable).

|  |  |  |  |
| --- | --- | --- | --- |
| **Master** | **BA + 90** | **Doctorate** | **National Board Certification** |
|  |  |  |  |

## Explanation of course(s):

Objective in taking the course(s):

**Units received after August 30th will not be processed for the current year.**

**Upload form with Transcript to** [unitcertification@fresnounified.org](mailto:unitcertification@fresnounified.org).