


MEMORANDUM

From the Desk of the Acting Director of Business Services

TO: Professional Employees
FROM: Nicholas D. Morelli 
DATE: August 1, 2019
SUBJECT: **Master's Degree Certification**

The employer and the Association further agree that salary adjustments made to Full-Time or Part-Time Temporary Professional Employees salaries after July 1, 2015 will be made as follows:

All professional employees who have post-graduate work adjustment at the Master's +15 and Master's +30 credit levels will be placed on the schedules found in Appendix A. The adjustments shall not exceed thirty (30) credits beyond the one Master's Degree.

Adjustment in salaries will be made two times per year in accordance with the following schedule:

DEGREE EARNED	APPLICATION SUBMISSION DATE	PAID
January-June	July 31st	September
July-December	January 31st	March

The attached Master's Degree Certification Form should be completed in its entirety and submitted with the following documentation to Ellen Scott, c/o Administration Building:

- **Letter of acceptance into a Master's Degree program**
- **An official transcript indicating grades or Act 48 documentation-electronic copies will not be accepted**
- **A copy of the Master's Degree diploma when issued**

Please contact Ellen Scott at ext. 3104 with any questions or concerns.

NDM/es

Attachment

CC: Brian White, Jr. Ed.D.
Dr. Brian Slamecka
Debby Croft
Elementary and Secondary Principals

MASTER'S DEGREE CERTIFICATION FORM

Name: _____ Date: _____

REQUESTING THE FOLLOWING SALARY ADJUSTMENT:

_____ Master's Degree

_____ Master's Degree + 15

_____ Master's Degree + 30

DATE MASTER'S DEGREE CONFERRED: _____

DOCUMENTATION REQUIRED:

_____ Letter of acceptance into a Master's Degree program.

_____ Official transcript indicating grades or Act 48 documentation.
(Electronic copies will not be accepted. If transcript will be delayed, a letter from the Dean or Advisor indicating courses taken and grades earned will be accepted; transcript should then be sent as soon as possible.)

_____ A copy of Master's Degree diploma when issued (Master's+15/Master's+30 are not issued).

PLEASE FORWARD THE COMPLETED MASTER'S DEGREE CERTIFICATION FORM ALONG WITH ALL REQUIRED DOCUMENTATION TO: ELLEN SCOTT, ADMINISTRATION BUILDING.

Adjustment in salaries will be made two times per year in accordance with the following schedule:

DEGREE EARNED	APPLICATION SUBMISSION DATE	PAID
January-June	July 31st	September
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COMMENTS:

For Office Use Only:

Office of the Director of Business Services: _____
(Initials) (Date)

Superintendent: _____
(Initials) (Date)

Payroll Office: _____
(Initials) (Date) (Step) (Salary)

Personnel Office: _____
(Initials) (Date) (Step) (Salary)