

## Please Remember the Following When Requesting Approval for Staff Development Activities

### In-Service Courses (9 Hours = 1 Credit)

You earn one in-service credit for each 9 hours of in-service coursework.

You are responsible for saving your course certificates and submit them when you have earned 1 credit. They can only be submitted for payment in blocks of 9 hours (1 credit).

All requests for approval for in-service credit should be forwarded to David Seaver, Director of Human Resources.

Courses must be approved by the Board of Education prior to the start of the in-service activity.

### In-Service Credit Guidelines

1. No duplicate courses.
2. Limit of three in-service credits per year.
3. Limit of 15 in-service credits per career unless change in job title.
4. Courses taken within the school day are not approved for payment.
5. The District has the right to limit the number of attendees to district programs only. The District will not limit the number of attendees to an outside course.
6. Payment will be made in **late fall** for courses submitted by **October 1** and in **late spring** for courses submitted by **April 1**.

**South Colonie Central School District  
In-Service Credit - Support Staff**

In-service credit is given for courses, which are officially approved by the Board of Education. In-service credits shall be awarded on the basis of one credit per 9 clock hours of instruction to be paid in one-credit increments. Nine clock hours equals one in-service credit. Support staff will be paid \$16 per credit hour or \$72 for a one time payment. This form must accompany the original certificate(s) achieved upon completion of the course. All coursework must be pre-approved by the Board of Education. Submit completed forms to the Personnel Office.

Name \_\_\_\_\_

Credits

Course Date	In-Service Course	Clock Hours

**Total Hours (9 hours = 1 Credit)** \_\_\_\_\_

Election: Please Check One:

Payment of \$16 per credit – paid yearly.

Payment of \$72 per credit – one time payment.

Date: \_\_\_\_\_ Signed \_\_\_\_\_

Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Credit Approval: To be completed by District Office

Date: \_\_\_\_\_ Signed \_\_\_\_\_

Payroll Records Adjusted On \_\_\_\_\_ By \_\_\_\_\_

Upon payroll record adjustment, this form is placed in the employee's permanent file