IMPERIAL COMMUNITY COLLEGE DISTRICT

Request for District Approval to take courses for the purpose of
Advancement on the Salary Schedule

Teaching/NonTeaching Faculty: _____   Date:_____

A.   Proposed Course(s): After course title, check column a (new) or b (repeat), as applicable.

SUBJECT AREA	COURSE NUMBER	COURSE TITLE	a	b	INSTITUTION	UNITS QTR.	SEM.

B.   If the above course(s) is (are) not available or canceled due to enrollment, a substation (s) will be made from the following list to alternates:

SUBJECT   COURSE
 AREA