Canton School District
Re-certification and Graduate Credit Listing

Employee Name: _____

Number of years employed by Canton School District: _____

Present Lane: _____ **Changing to Lane:** _____
(BA; BA+15; BA+30; MA; MA+15; MA+30)

LIST COURSES YOU HAVE TAKEN THAT QUALIFY FOR SALARY LANES

Course Name	Credits	School	Year

Verification: _____

Date: _____ **Teacher Signature:** _____