

**Chadron Public Schools**  
602 East 10<sup>th</sup> Street  
Chadron, NE 69337

**REQUEST FOR COURSE APPROVAL  
FOR SALARY SCHEDULE ADVANCEMENT**

STAFF MEMBER: \_\_\_\_\_

DATE OF REQUEST: \_\_\_\_\_

Course Description & Number	Credit Hours	College or University

ADMINISTRATIVE ACTION:     Approved                       Not Approved

\_\_\_\_\_  
Dr. Sherlock Hirning, Superintendent

\_\_\_\_\_  
Date

\*Attach course description & support material if the course is not included on an approved degree plan.