

# A/B

LOS ANGELES UNIFIED SCHOOL DISTRICT  
HUMAN RESOURCES DIVISION  
Salary Allocation Unit  
www.lausd.org/salary

APPLICATION FOR POST GRADUATE STUDY AND EXPERIENCE CREDIT

Employee Number or Social Security Number (List only one) E-Mail Address

Name (Last, First Middle) Telephone

Street Address City State Zip Code

**INSTRUCTIONS:**

**THIS A/B FORM MUST BE COMPLETED, SIGNED AND RETURNED FOR APPROPRIATE RATING-IN.** (Use black or blue ink only.)

**I. OFFICIAL TRANSCRIPTS VERIFYING THE BACHELOR'S DEGREE AND ANY COMPLETED POST-GRADUATE STUDY AND DEGREES MUST BE ATTACHED** (LAUSD/UTLA Agreement, Article XIV, Section 13.0, b.1).

a. BACHELOR'S DEGREE

Institution: \_\_\_\_\_ Major: \_\_\_\_\_ Date conferred \_\_\_\_\_

**POST-GRADUATE UNITS AND BLENDED PROGRAM COURSEWORK**

Colleges/Universities	Units (Semester/quarter)	Colleges/Universities	Units (Semester/quarter)

Total Estimated Post- Graduate Units \_\_\_\_\_

b. MASTER'S DEGREE (complete if applicable):

Institution: \_\_\_\_\_ Major: \_\_\_\_\_ Date conferred \_\_\_\_\_

c. DOCTORATE'S DEGREE (complete if applicable):

Institution: \_\_\_\_\_ Major: \_\_\_\_\_ Date conferred \_\_\_\_\_

**II. EXPERIENCE:** If no experience, indicate "NONE" below.

- a. List each type of paid experience related to your assignment in chronological order. For experience outside the Los Angeles Unified School District, official verification on letterhead stationery is required. (Refer to the "Instructions for Rating-In", Form 3301 and "Request for Verification of Employment" Form 3325.)
- b. Please list experience with the Los Angeles Unified School District. (Employment Verification is not necessary)

\*Please abbreviate type of experiences. (LAUSD/UTLA Agreement, Article XIV, Section 14.0 a-m).

- |                                                                            |                                           |
|----------------------------------------------------------------------------|-------------------------------------------|
| T – Day School Certificate Experience                                      | A – Certificated Adult Education Teaching |
| C – College Training                                                       | S – Social Work                           |
| P – Teaching in a private and/or Parochial school (Maximum 5 years credit) | N – School or Public Health Nursing       |
| V – Vocational Work                                                        | Ps – Psychologist                         |
| L – Library Services                                                       | R – Professional Related Non-Teaching**   |

No credit is granted for experience prior to Bachelor's Degree and/or experience more than 23 years immediately preceding the election date.

\*\*Must have a degree in the shortage field, and be contracted as a Probationary or District Intern employee in the designated shortage field.

Employer	Location	Type*	Paid Employment Dates		Hours Per Week
			From	To	

I understand that my step placement on the salary table will be established from the original OFFICIAL DOCUMENTS ACCOMPANYING this application consistent with the LAUSD/UTLA Agreement, Article XIV, Section 5.0, 8.0 and 17.0. I have carefully checked and verified the completeness of these official documents. I also understand that all documents submitted with this form must be retained on file and cannot be returned.

Signature \_\_\_\_\_

Date \_\_\_\_\_



# 3300

**LOS ANGELES UNIFIED SCHOOL DISTRICT  
Human Resources Division  
Salary Allocation Unit**

**Salary Determination (New Contract Teacher): Check-off and complete information below.**

_____	_____	_____	_____
SSN or Employee No.	Last Name	First	MI

\_\_\_\_\_

Email Address

1. I have received Rating-In A/B Form 3310 with instructions and rules pertaining to the salary allocation process. I understand that until these forms, together with required official verification are completed and filed with the Salary Allocation Unit, I will receive the minimum salary for my assignment/position.
2. I have additional study (completed prior to this current assignment) to submit.
- a. Accredited study: File the official transcript with a completed and signed S Form, as appropriate.
- b. Non-Accredited study: File the official verification of completion with a completed and signed NA Form.
- \_\_\_\_\_ I am submitting the following additional study and forms today: \_\_\_\_\_
- \_\_\_\_\_ I will submit additional study at a later date. Form(s) given: \_\_\_\_\_
3. I have completed the Blended Program Coursework (while earning the bachelor’s degree).  **YES**  **NO**
- \_\_\_\_\_ I have received the letter of Request for Verification of Blended Program Coursework (Form 3205-1)
- \_\_\_\_\_ I will submit the required official university verification on letterhead with appropriate signatures and/or seals at a later date. Form(s) given:  **A/B Form**  **S Form**
4. I have additional supplemental experience (other than LAUSD experience) to submit. File the original employment verification letter(s) with a completed and signed S Form.
- \_\_\_\_\_ I am submitting the following supplemental experience today: \_\_\_\_\_
- \_\_\_\_\_ I will submit additional supplemental experience at a later date. Form given: \_\_\_\_\_
5. I have no additional study or experience to submit. Please determine my salary placement based upon material currently in my salary file. NOTE: Additional study  Additional experience  was submitted recently. Comments: \_\_\_\_\_

**IMPORTANT:** Verification of study and experience **must be submitted within four (4) calendar months** from the effective date of election. Verification documentation submitted after the four-month period will be effective at the beginning of the pay period following submission (LAUSD/UTLA Agreement, Article XIV, Section 13.0). Documents that are later determined to be incomplete, not original and/or unofficial may cause delays in appropriate salary placement or advancement. You will receive written notification of your salary placement.

6. Salary Allocation staff has explained the rating-in, salary placement, and schedule/step advancement process.

\_\_\_\_\_

**Signature** **Date**

Visit our website [www.lausd.org/salary](http://www.lausd.org/salary) to obtain salary forms and information, or contact us at (213) 241-6121

*For Office Use Only*

Type of Contract \_\_\_\_\_ On or Before Date \_\_\_\_\_ Location \_\_\_\_\_ Staff initials \_\_\_\_\_

Elementary  Secondary  Special Education  Subject Field \_\_\_\_\_ Other \_\_\_\_\_

**New Employee**  **A/B Form**  **Benefits Information Letter**

Comments: \_\_\_\_\_



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**SUPPLEMENTAL APPLICATION FOR  
TRAINING AND EXPERIENCE**

**IMPORTANT INFORMATION (Type form before printing or use black ink only.)**

1. A new employee may file supplemental applications for rating-in. **Allocation to a higher step or schedule based on this application will be retroactive to the date of election if application is received by the Salary Allocation Unit within four (4) calendar months of such date, otherwise it will be effective at the beginning of the pay period following receipt of the application.**
2. OFFICIAL DOCUMENTS verifying additional training and/or experience must be attached to this application. Do not submit verification of training or experience that has previously been filed with the Salary Allocation Unit.
3. Submit this application and official verification(s) to **HRsalary@lausd.net** or:

**Los Angeles Unified School District  
Human Resources Division  
Salary Allocation Unit, 15<sup>th</sup> Floor  
P.O. Box 3307  
Los Angeles, California 90051**

Person ID/Employee No. \_\_\_\_\_ Last Name \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

School or Administrative Unit \_\_\_\_\_ Grade \_\_\_\_\_ Subject \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**EDUCATION (Attach official transcripts)**

College/University	Units	Inclusive Dates of Study	
		From	To

Master's Degree (complete if applicable):

Institution:	Major:	Date Conferred:
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Doctorate' Degree (complete if applicable):

Institution:	Major:	Date Conferred:
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**EXPERIENCE (Attach original employment verification letters)**

Employer	Paid Employment Dates		Hours per week
	From	To	

Signature of Employee \_\_\_\_\_

Date \_\_\_\_\_

