

**OPTION II:  
SALARY  
DIFFERENTIAL**



**CLASSIFIED PROFESSIONAL DEVELOPMENT**

*NOTE: Application Must Be Submitted Prior to Starting Program*

Name \_\_\_\_\_ Date of Application \_\_\_\_\_  
Last First MI

Employee ID \_\_\_\_\_ Business Phone No \_\_\_\_\_

Campus: \_\_\_\_\_  
 DIST  CCC  GWC  OCC  DIS

Job Title and Dept \_\_\_\_\_

Original Hire Date \_\_\_\_\_

Education Plan on File: Yes  No

**Objective**

Committee approval under this option provides a salary differential based on the receipt of a Certificate of Achievement or a Degree.

Certificate of Achievement or Degree Objective:

\_\_\_\_\_

Dates: Start \_\_\_\_\_ Anticipated Completion \_\_\_\_\_

School \_\_\_\_\_ Total units to complete program \_\_\_\_\_

Are you receiving any other funding and/or release time? Yes  No

**Justification**

Use this space to explain your career goal/path and how this program could lead to upward mobility as a classified employee of the Coast Community College District (use extra sheets as necessary).

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

CPD Representative \_\_\_\_\_ Date \_\_\_\_\_

Approved  Tabled  Denied\*

Not to Exceed \$ \_\_\_\_\_ Date: \_\_\_\_\_

Contingent Upon Board Approval: \_\_\_\_\_ Reason: \_\_\_\_\_

Budget Year: \_\_\_\_\_ Budget Number(s) \_\_\_\_\_

**\*All denials subject to appeal**