

**Oak Grove School District #68
Lane Change Request Form**

Name: _____	Date of Request: _____
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Current Salary Schedule Position: Degree: _____ Lane: _____	Requested Salary Schedule Position: Degree: _____ Lane: _____
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Description of coursework taken, schools of coursework completed, and degree achieved.

Principal Signature: _____	Date: _____
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Superintendent Signature: _____	Date: _____
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Approved: ____ Yes ____ No

Transcripts Received and Verified: Date: _____ Initials: _____
