

PROFESSIONAL ADVANCEMENT APPLICATION

for Degree Programs

For a full description of the [Professional Advancement Program](#) refer to the NSHE Board of Regents [Procedures and Guidelines Manual](#), Chapter 3, Section 3.

Application for approval of degree programs and/or credit course work toward professional advancement and movement on the salary shall be as follows:

1. Prior to beginning the degree program or credit course work
 - Complete this application, indicating details of the degree or course work for which you are asking approval.
 - Submit the completed application to your Department Chair/Immediate Supervisor for a recommendation.
 - Department Chair/Immediate Supervisor will forward the application to the appropriate Dean for recommendation.
 - The Dean will forward the application to the Vice President for recommendation.
 - The Vice President, or designee, will notify the faculty member, Department Chair/Immediate Supervisor and Dean of action within twenty (20) working days of receipt of application.
 - The Vice President will forward the original application to Human Resources to be placed in personnel file.
2. Please use the Professional Advancement Application for Occupational Related Course Work Verification of Attendance to confirm your attendance if the sponsoring organization does not provide a verification of attendance form.
3. After successful completion of the degree program or credit course work, submit the following to Human Resources:
 - A copy of the initial application
 - An official transcriptHuman Resources will forward application to the President for final approval. If degree or course work completion will take longer than anticipated, notify TMCC Human Resources and your Dean/VP in writing prior to anticipated completion date.
4. Salary schedule column movement occurs only after approval of the President at a new contract year.
5. Appeal for denial of professional advancement must be made in writing to Faculty Senate Chair within ten (10) working days.

Professional Advancement Application for Degree Programs

GENERAL INFORMATION

First Name	Last Name		
Department	Division		
<i>I request approval for the following degree program. Attach a copy of the documentation that the course(s) meet accepted professional standards.</i>			
Institution Offering Degree Program	Degree	Major Emphasis	Number of Credits/Hours
I plan to complete this degree by: _____ (mm/yyyy)			
Rationale for approval for the program being relevant:			

SIGNATURES

Applicant	Date
Department Chair/Immediate Supervisor	Recommendation Date <input type="checkbox"/> Yes <input type="checkbox"/> No
Dean	Recommendation Date <input type="checkbox"/> Yes <input type="checkbox"/> No
Vice President	Recommendation Date <input type="checkbox"/> Yes <input type="checkbox"/> No
Final Approval for Salary Movement (completed by Human Resources)	
President	Approval Date <input type="checkbox"/> Yes <input type="checkbox"/> No