MASTER'S EQUIVALENCY PROGRAM



APPLICATION FORM

HUMAN RESOURCES DIVISION Washoe County School District

425 East Ninth Street P.O. Box 30425 Reno, NV 89520-3425

Phone (775) 348-0321 Fax (775) 333-5070

In order to qualify for the Washoe County School District's Master's Equivalency Program, a teacher must earn 42 credits beyond a BA/BS degree from an accredited college or university. Please be aware that the salary advancement allowed by this program is only valid in the Washoe County School District.

A minimum of 32 credits must be graduate level; the remaining 10 credits may be a combination of additional graduate, undergraduate and/or inservice classes, in accordance with the requirements listed in Article 24.3.5 (a-d) and 24.3.6.

Effective January 1, 2004, there are new requirements for the types of graduate credits eligible. Please refer to Article 24.3.5 for complete information. You will need to provide a photocopy of the course description of all graduate-level classes you have identified as meeting the "core content area" requirement. This includes both classes you have already taken as well as the classes you intend to take. If you do not provide this documentation, the committee will not be able to approve your program. Course descriptions can normally be obtained from the institution's catalog or from their website.

Last Name		First Name		
Home Address				
City	State	Zip	Phone	
School/Location:				
Current Grade Level(s) Assignment:				
Current Subject Area(s) Assignment:				
License(s)/Endorsement(s) Currently Held:				
(If applicable) I am seeking highly qualified status/licens	sure in the folk	owing core acade	emic area(s):	
(If applicable) I am seeking the following endorsement	in an area of n	eed , as determin	ed by the District (i.e., ESL,	

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Family & Consumer Science, GT, Industrial Arts, Math, Music, Special Education)

Name:

GRADUATE COURSES TO BE TAKEN DURING PROGRAM (32 MINIMUM)

Note: At least 27 credits must be in your core content area assignment-see below)

(Please list eligible classes already completed as well as proposed classes)

Course #	Course Title	University or College	Date(s)	Type of Class*	Grade Received	# Credits
	I	1	1		Total Credits:	

You will need to provide a photocopy of the course description of all graduate-level classes. This includes both classes you have already taken as well as the classes you intend to take. If you do not provide this documentation, the committee will not be able to approve your program. Course descriptions can normally be obtained from the institution's catalog or from their website.

*Type of Class: Please use the following designations:

"C"	Core Content Area	Elementary Teachers	Core =	Reading/Language Arts, Math, Social Studies, Science		
		Secondary Teachers	Core =	Current Teaching Assignment and Other Licensed Area(s)		
		Specialty Teachers	Core =	Current Teaching Assignment and Core Elementary Areas		
"E"	Elective			·		
"S"	Seeking Highly Qualified Status in a Core Area/Seeking an Endorsement in an Area of Need as Determined by the District					

UNDERGRADUATE/INSERVICE/CORPORATE COURSES

You may earn a maximum of 10 credits using any combination of the areas listed below, with a maximum of 6 inservice credits.

Credits that have already been earned ARE NOT eligible.

UNDERGRADUATE COURSES

Course #	Course Title		University or College		Date(s)	Credit
					Total Credi	ts:
			(6 Credits Maximum)			
Course #	Course Title		Offered By		Date(s)	Credit
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Course #	Course Title		Offered By		Date(s)	Credit
					Total Credi	ts:
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