

**Special Education  
Education Support Professional (ESP)  
Request for Salary Lane Change**

Employee Name: \_\_\_\_\_ School/Department: \_\_\_\_\_

Current Title \_\_\_\_\_ Current Lane \_\_\_\_\_ Step \_\_\_\_\_

The following requirements for salary lane change have been met (complete applicable areas). No lane changes will be effective until approved by the Human Resources Department. The effective date is the first Monday of the following month upon Special Education Administrator approval and receipt in HR of this form. Employees receiving a lane increase will be placed on the closest step on the new lane without a decrease.

Principal/Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Instructional Assistant Mild/Moderate**

**Lane 3 / 4**

- |  |                       |
|--|-----------------------|
| <input type="checkbox"/> Completion of Basic Course (Required)                                 | Date Completed: _____ |
| <input type="checkbox"/> Completion of Mild/Mod Course (Voluntary)<br>(Approximately 25 hours) | Date Completed: _____ |

**Instructional Assistant Self-Contained/South Valley**

**Lane 4 / 5**

- |   |                       |
|---|-----------------------|
| <input type="checkbox"/> Completion of Basic Course (Required)                                | Date Completed: _____ |
| <input type="checkbox"/> Completion of Advanced Course (Required)<br>(Approximately 40 hours) | Date Completed: _____ |

**Instructional Assistant Special School (KSHS/River's Edge)**

**Lane 5 / 6**

- |   |                       |
|---|-----------------------|
| <input type="checkbox"/> Completion of Basic Course (Required)                                | Date Completed: _____ |
| <input type="checkbox"/> Completion of Advanced Course (Required)<br>(Approximately 40 hours) | Date Completed: _____ |

**The employee identified above has completed the required training and is now eligible for a lane increase.**

**SpEd Administrator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TO BE COMPLETED BY HUMAN RESOURCES:**

Date Received in HR: \_\_\_\_\_

Current Lane: \_\_\_\_\_ Current Step: \_\_\_\_\_ Current Hourly Rate: \_\_\_\_\_

New Lane: \_\_\_\_\_ New Step: \_\_\_\_\_ New Hourly Rate: \_\_\_\_\_ Effective Date: \_\_\_\_\_

\_\_\_\_\_  
Human Resources Administrator

\_\_\_\_\_  
Date