Instructions for Training Stipend Request

Paraprofessional and Professional/Technical Staff

As you are putting together your packet to request a training incentive stipend, please check that your packet includes the following materials.

- A fully completed Training Application signed by the employee and supervisor/principal
- A transcript printed from Better & Better indicating the date, name of the class, and hours of attendance for the coursework taken in the past 48 months

OR

- A certificate of attendance from each class/workshop you have attended. The certificate must include the name of the workshop/class, material or content presented, date of attendance, and the training hours issued.
- If a certificate is not issued for a class that you have taken, an agenda or registration form is acceptable only if the following criteria are met:

The agenda/registration form **must include**:

- A. **NAME** of class/workshop
- B. **CONTENT** presented at class/workshop
- C. <u>DATE</u> of class/workshop
- D. **HOURS** to be received
- E. The <u>SIGNATURE</u> OF YOUR SUPERVISOR/PRINCIPAL ON THE AGENDA/REGISTRATION FORM approving your attendance

Please Remember:

- Of the 36 hours, no more than ten (10) hours may be for personal wellness activities related to fitness, exercise, or diet.
- New-hire training administered from one staff to another will not qualify unless the course is listed in Better & Better and District approved.

*Please put your certificates in the order that you list them on your cover sheet and verify that you have a certificate or proper verification for each workshop/class.

If materials are missing, your packet will be returned to you in the school mail.

*If you intend to use partial hours from a class/workshop, please indicate on the certificate and application form how many hours you intend to use for this training stipend packet and how many hours will be carried over for possible future use.

**If you are using carry-over hours from a previous training packet, it is your responsibility to include the copy of the application form and certificate indicating these carry-over hours from a previous training packet.

PLEASE KEEP A COPY OF ALL FORMS YOU SEND TO THE DISTRICT OFFICE.

If you have any questions, please call Human Resources at 402-715-8200 for assistance.

Failure to complete the application packet properly and obtain the proper signatures will result in the packet being returned to you and the process for a 2% salary adjustment will be delayed.

Revised: 8/2019

Application for Training Credit Paraprofessional & Professional/Technical Employees

Paraprofessional & Professional/Technical Employees					
NAME:		DATE:		ID:	
(Last) (First)	(M.I.)				
ASSIGNMENT:		BUILDING:			
To apply for a 2% pay adjustment, please f	ollow the instru	actions for completin	g the Train	ing Credit A	Application.
Complete this application form and retu completed within <u>48</u> months of the date of a classes submitted for this training ince documentation. All certificates must be significant to the complete this complete the complete this application form and return complete this application for this application for the date of a classes submitted for this training incention for the complete this application for the class of the cla	application. At entive), certific	tach a copy of your <i>h</i> ates of completion,	<i>Better & Bet</i> , letters of	<i>tter</i> transcri	pt (highlight
*Please note: Of the 36 hours, no more the fitness, exercise or diet.	han ten (10) ho	ours may be for per	rsonal wellr	<u>iess activiti</u>	es related to
This form must be signed by your supervito the accuracy of the application. Pay a Human Resources, the pay increase will be retroactive. A maximum of one pay adjust	ndjustments will effective with t	ll be reviewed by H the first pay period f	luman Reso	ources. If a	pproved by
Title of Training Activity or Description	(i.e. Millard	ng Provider Public Schools, ESU College, UNO, etc.)		ing Dates /date/year)	Contact Hours
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Human Resources Office Use Only					
Staff Member's Signature		Approved for	contac	et hours.	

Supervisor's Signature

Revised: 3/2021

Date

Human Resources Official Signature