

OTBS

Approved Not Approved

Date: _____

By: _____

**BEVERLY HILLS UNIFIED SCHOOL DISTRICT
Request for Approval of Professional Growth Program**

TO: Human Resources

Growth Period _____ to _____

FROM: _____
(Please print name)

(School)

I request approval for credit from the Human Resources Department of the Beverly Hills Unified School District for the following courses:

I.	Course Title	School	Sem. Units/Points	Completion Date

Reason and/or benefit of courses (to your goals or job).

II.	Class/Workshop/Conference	Offered By	Dates/Times	Completion Date

Reason and/or benefit of courses (to your goals or job).

