

**WILLITS UNIFIED SCHOOL DISTRICT**  
District Credits

Employee Name: \_\_\_\_\_

School Site: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Workshop/Course Title: \_\_\_\_\_

Instructor: \_\_\_\_\_ Location: \_\_\_\_\_

Date Started: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Hours Completed: \_\_\_\_\_ Units Approved: \_\_\_\_\_

Per WTA Agreement, Item 3. (b):

In each fifteen (15) unit division, four (4) units may be earned by District units for horizontal or growth unit credit. One (1) District unit can be earned by participating in twenty (20) hours of an integrated school or District in-service.

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Immediate Supervisor

Superintendent/Designee: \_\_\_\_\_ Date: \_\_\_\_\_

***Please note: A completed Salary Placement Verification form must accompany this District Credit Form to be submitted for salary advancement.***