

# Teacher Classification Board

## Application for Appeal of Teacher Salary Classification

|                 |  |            |             |
|-----------------|--|------------|-------------|
| Last Name       |  | First Name |             |
| Street/P.O. Box |  |            |             |
| Town/City       |  | Province   | Postal Code |
| Email           |  |            |             |

|                          |  |  |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|--|--|
| Certificate Type         | Certificate Number                             |  |  |  |  |  |  |  |
| Employing School Board   | Present Classification Granted by School Board |  |  |  |  |  |  |  |
| Classification Requested |  |  |  |  |  |  |  |  |

### Date of Eligibility Claimed

| Day | Mon | Year |  |
|-----|-----|------|--|
|     |     |      |  |

Attach to this form a detailed explanation of your appeal to the Teacher Classification Board. (Please cite the section of *The Teacher Salary Classification Regulations* that you believe has not been applied correctly.)

The applicant will be responsible for seeing that all supporting evidence and transcripts are on file at the Ministry of Education. Applicants may consent to the ministry accessing transcript information on the Saskatchewan Professional Teachers Regulatory Board portal ([www.sptrb.ca](http://www.sptrb.ca)).

### Date of Application

| Day | Mon | Year |  |
|-----|-----|------|--|
|     |     |      |  |

\_\_\_\_\_  
Teacher

\_\_\_\_\_  
Signature (electronic signature acceptable)

(I acknowledge that in accordance with *The Electronic Information and Documents Act, 2000*, my electronic signature has the same effect as a signature.)

Submit form to the Ministry of Education: Email to [teacher.classification@gov.sk.ca](mailto:teacher.classification@gov.sk.ca).