

**PALOMAR COLLEGE**  
**Classified Employees Professional Growth Program**

**NOTICE OF COMPLETION**

Name \_\_\_\_\_ Department \_\_\_\_\_ Date \_\_\_\_\_

Job Title \_\_\_\_\_ Extension \_\_\_\_\_

**STIPEND: Check One**

I wish to receive an annual stipend of \$500 in pro-rated monthly payments.

I wish to receive a one-time lump sum stipend of \$2,000.

Employee Signature \_\_\_\_\_

<b>Course # and Title/ Seminar/Workshop/ Committee/Service</b>	<b>GRADE (C or Better)</b>	<b>SEMESTER &amp; YEAR</b>	<b>NO. UNITS (Semester or Quarter)</b>	<b>Professional Growth Points</b>

**Attach** transcript, certificate or similar evidence, and **submit Original only** to Human Resource Services.

**Due** no later than **SEPTEMBER 15, FEBRUARY 15, or JULY 15** of the semester following completion of your program. Stipend will be retroactive to the first day of the month in which the *Notice of Completion* is submitted (September 1, February 1 or July 1).