

Lincoln County School District

Letter of Intent

Certified/Administration

NAME _____ DATE _____
Last _____ First _____ Middle _____

Will you be returning to the Lincoln County School District for the 2026-2027 School Year?

Please circle: Yes / No

Signature

If you are anticipating a salary lane change for the 2026-2027 SY, please circle: Yes / No

If yes, please indicate how many lane changes: 1 / 2 or Master's

Please explain if needed:

(Proof of credits awarded and/or degrees received must be documented and sent to the District Office by August 27, 2026)

Date Stamp Received: