



SUPPLEMENTAL PAY FORM

CERTIFICATED STAFF ONLY

Employee:		<input type="checkbox"/> HOF	<input type="checkbox"/> CHS
Prepared by:		<input type="checkbox"/> FTC	<input type="checkbox"/> PAN
		<input type="checkbox"/> JHS	<input type="checkbox"/> DW/DO

The term "professional development rate" shall mean employees engaging in additional non-instructional duties, beyond the regular contracted day, with Administrative approval. These hours shall be compensated at the rate of \$35.00/hour. Optional: Up to 10 hours of professional development pay will be available to each employee. Hours must be pre-approved by the Executive Director of Learning or the building Principal. ***PROFESSIONAL DEVELOPMENT HOURS WILL NOT BE PAID WITHOUT FUNDING PROGRAM SELECTED AND PRINCIPAL OR DIRECTOR SIGNATURE.**

PROFESSIONAL DEVELOPMENT HOURS Article VII, Section 5, C, 2				
	Date	Description	Hours	Program (MUST BE CHECKED)
<input type="checkbox"/> <u>Bargained TU15</u> (opt'l 10hrs) <input type="checkbox"/> <u>Building TT55</u> (building budget, Principal approved) <input type="checkbox"/> <u>District TS15</u> (district funds, Dept of Learn. approved)				<input type="checkbox"/> Building Budget <input type="checkbox"/> 0171 - Dept of Learn <input type="checkbox"/> 1400 - Learn. Recover. <input type="checkbox"/> 5100 - Title I <input type="checkbox"/> 5274 - Title IV <input type="checkbox"/> 5275 - Title II <input type="checkbox"/> 5500 - LAP <input type="checkbox"/> 2100 - SPED <input type="checkbox"/> 5801 - BEST <input type="checkbox"/> 5802 - TPEP <input type="checkbox"/> 7400 - HiCap

PREP PERIOD/SUBBING - Article V, Section 3 (10 E 530 0100 27 2120 LLLL 0000 0000 1)					
Date	Absent Teacher	Absence Reason	Class	Rate	Hours
				Per Diem	
				Per Diem	
				Per Diem	
				Per Diem	
				Per Diem	

CLASSROOM MOVE - Article III, Section 7, G (10 E 530 0100 27 2150 LLLL 0000 0000 1)		
Dates	Reason for Move (involuntary, out of building transfer, etc.)	Stipend
		\$1,000.00

CLASSROOM OVERLOAD - Article V, Section 2 (Use Home Account Coding)						
Elementary Maximums	Middle/High School Maximums	Month (in Overload)	Grade/Period	Total # of Students	# of Overload Students	Dollars (\$175 per overload)
K-2 = 22 3-5 = 26	6-8 = 30 9-12 = 32					

APPROVAL	
Employee:	Date:
Principal/Director:	Date:

Date Received in Payroll Office: _____ Month Paid: _____