## **OVERLOAD NOTICE - REQUEST FOR COMPENSATION**

TEACHER					CLASS								GRADE											
<b>ELEMENTARY - CL</b>	ASSROOM	Λ																						
Date:		·-		Т	T	Т	T	1	T	T	П									T	T			
Student Cnt:																						$\overline{}$		
# of Overload:																						$\overline{}$		
Total Overload:																						$\vdash$		
\$ per Overload:	\$15.00																							
Total Due:																						$\vdash$		
<b>ELEMENTARY - RE</b>	ADING/MA	TH BL	OCK C	CLASSI	ES																			
Date:				Π	Т	Т			Т	T	Π													
Student Cnt Rdg:																								
Student Cnt Math:																								
# of Overload:																								
Total Overload:																								
\$ per Overload:	\$4.00																							
Total Due:																								
SECONDARY - CLA	SS PERIC	DS																						
Dates of Overload:																								
Student Cnt Pd 1:																								
Student Cnt Pd 2:																								
Student Cnt Pd 3:																								
Student Cnt Pd 4:																								
Student Cnt Pd 5:																								
Student Cnt Pd 6:																								
Student Cnt Pd 7:																								
# of Overload:																								
Total Overload:																								
\$ per Overload:	\$3.00																							
Total Due:																								
<b>SECONDARY - IEP</b>	<b>CASE OVI</b>	ERLOA	\D																					
Dates of Overload:																								
IEP Case Count:																								
# of Overload:																								
Total Overload:																								
\$ per Overload	\$3.00																							
Total Due:																								
Teacher Signature							Administrator Signature								Budget Code									
Date								Date																