

Clinton Community School District

Employee Request for Extra-Duty Pay

Employee Instructions: Complete sections I and II, sign on employee signature line and forward to your Administrator/Supervisor for the completion of section III and his/her approval.

Employee Name: _____

Date(s) Worked: _____

I. HOURS WORKED:

_____ Total Hours OR ½ day 1 day Other: _____

II. PURPOSE OF WORK:

Curriculum Writing Other: _____

Employee Signature

Date

III. PAY RATE FOR EXTRA DUTY:

- \$12.30/hour (curriculum writing)
- Contract rate of pay
- Other: \$ _____/hour

} **To be completed by
Administrator/Supervisor**

Administrator/Supervisor Approval

Date

Account Code: _____

****Forward to the Business Manager for approval****

Business Manager Approval

Date

Clinton Community School District

Administrator Request for Extra-Duty Pay

Administrator/Supervisor Instructions: Complete the form as outlined and submit to the payroll/business office.

Extra-Duty: _____

Last Name	First Name	Stipend	or	Hours	Rate per Hour	Total
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
TOTAL						\$ -

_____ Administrator/Supervisor Approval

_____ Date

_____ Business Manager Approval

_____ Date

Account Code: _____