EARNED RELEASE TIME SHEET
For Certified Staff Only

EFFECTIVE JULY 1, 2021, THIS FORM REPLACES <u>ALL</u> COUPONS. ALL ERT TIME EARNED AFTER 7/1/2021, REGARDLESS OF HOW IT IS EARNED, MUST BE RECORED ON AN ERT TIME SHEET TO BE CONSIDERED FOR USE.

NAME: _____   SCHOOL(S): _____
                    (Please Print)

Earned Release Time (ERT) <mark>**<u>must be used within three years of the date of the signature on this form</u>**</mark>.

ERT time:
- must be pre-approved by the employee's Principal/Supervisor prior to taking ERT. If employee travels to multiple schools, the principal(s)/supervisor(s) whose building will be affected by the use of the ERT must provide prior approval.
- may be earned in 15-minute increments
- may be used in 15-minute increments
- <u>may not</u> be used if someone else is covering their student responsibilities (ex: noon supervision, after school supervision, classes, etc).
- <u>may not</u> be use during district scheduled PD Days, scheduled meetings (building or district level) that the employee is required to attend, or conference days.
- can be earned for: attending IEP meetings beyond the normal work day, attending building level meetings beyond the normal work day, subbing during the work day in lieu of payment, and other tasks that are outside of normal work hours and duties that are pre-approved by a building or district administrator.
- cannot be transferred to other staff or considered for payment of any kind.

Staff should follow the regular building process for who to notify, as well as the sign-in/sign-out procedures when using ERT time.

<u>If accessing a calendar workday (W) in exchange for the ERT day, all regular work commitments must be completed prior</u> to the use of the <u>release time</u>. <mark>Do not lose this sheet. Attach additional sheets as needed.</mark>

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Earning ERT Hours				Using ERT Hours			
Description of how ERT was earned (ex: subbing for…., IEP meeting from 4pm to 5 pm, etc)	**Date Earned** (mm/dd/yyyy) **Hours expire 3 yrs after this date**	**Hours Earned** (ex: 1.25 hours)	**Signature of Supervisor or Chairperson**	**I would like to use ERT on:** (mm/dd/yyyy)	**Amt of ERT to be used** (15 min increments)	Principal/Supervisor Approval	Date Approved (mm/dd/yyyy)