APPENDIX D

SAN MATEO-FOSTER CITY SCHOOL DISTRICT

STAFFING RATIO OPTION REQUEST FORM – REGULAR EDUCATION

_____ _____ grade class reached _____ students on _____, 2____
Name of Teacher Level Number Date

We are requesting the following option for additional support:

SELECT ONE

___ 1. The principal, teacher/s, and Assistant Superintendent may develop creative ways to aid the teacher/s with large class sizes**.**

___ 2. For TK-3 and 3/4 combo classes, an additional hour of aide time will be available for classes of 29, two additional hours of aide time for classes at 30, and three hours of additional aide time for classes that have an enrollment of 33. If an aide cannot be found, teachers are entitled to a retroactive stipend.

___ 3. For 4-5 classes, an additional hour of aide time will be available for classes of 31, two additional hours of aide time for classes at 32, and three hours of additional aide time for classes that have an enrollment of 33. If an aide cannot be found, teachers are entitled to a retroactive stipend.

___4. For TK-3 and 3/4 combo classes, a stipend of $165 per month for each additional student over 28 up to $495 a month for classes of 31.

___5. For 4-5 classes, a stipend of $165 per month for each additional student over 30 up to $495 a month for classes of 33.
PLEASE USE THE SPACE BELOW TO DESCRIBE OPTION 1, IF SELECTED.
(Attach additional sheet/s, if necessary.)

_____ _____
Teacher Teacher Site

_____ _____
Principal Assistant Superintendent

SEND COMPLETED FORM TO HUMAN RESOURCES FOR APPROVAL & DISTRIBUTION

cc: Principal

Office Use Only- HR TO PAYROLL:
Date:_____
Pay Employee: _____
Employee Name/EIN:_____