



# Greenwood Lake Union Free School District

Greenwood Lake, New York 10925

## Auxiliary Pay Request Form

Name \_\_\_\_\_ Role (Teacher/SRP/etc) \_\_\_\_\_

*(all activities must be approved in advance by an administrator or by Board approval)*

Activity	Description/Event	Date(s)	# /Amt	Rate	Total
Chaperone: Evening Event <small>(beyond 4 events)</small> (≤ 2.5 hours)					
Chaperone: Overnight					
Chaperone: Past Contractual Work Day					
Stipend (Club/Athletics/Mentor) <small>*Clubs must submit attendance sheets *Mentors must submit hours &amp; forms</small>				As per contract	
In-service Presentation					
Teaching Assistant Covering Class				(\$12/period OR gr K-6 \$30 ½ day, \$60 full day)	
Hourly Rate					
Daily Rate					
Other (i.e. Curriculum Leaders, Athletic Director, etc)					

\*\*\* *Submit one form per event* \*\*\*

\_\_\_\_\_  
Your Signature Date

\_\_\_\_\_  
Administrator Signature Date

\_\_\_\_\_  
Approved by Superintendent Date