



To be completed by applicant. Incomplete forms will not be processed.

Name of applicant: _____

Date: _____

Address of applicant: _____

Telephone of applicant: _____

Position: (please fill in the position being applied for)

Coaching _____
(requires approval signatures of A - D below)

Co-curricular _____
(requires approval signatures of B - D below)

Sixth Section _____
(requires approval signatures of B - D below)

Stipend Amount: _____
(as found below and in current MTA Contract)

Below to be completed by Administration

Approved by:

A. Athletic Director _____ Date: _____

B. Principal _____ Date: _____

C. Asst. Superintendent _____ Date: _____

D. Superintendent _____ Date: _____

BOE Meeting Date: _____

NOTICE TO APPLICANT: This application does not guarantee appointment and approval.

PRIOR to reporting to the above-stated co-curricular duty, all **NEW** employees must report to the Business Office to complete the appropriate paperwork. In the instance of a co-curricular assignment, at the end of the season, please submit a Claim form to your immediate supervisor in order to be paid for the position.