



2022-23

Supplemental and Hourly Pay Request For HOURLY Staff *(Non-salaried)*

Instructions: The purpose of this form is to report hours worked that are *in addition to* your regular assignment. This includes hourly pay, supplemental pay, and miscellaneous temporary assignments. Report time in hours. Forms are due to payroll on the Monday following payday to be paid on the next payroll. Budget code must be listed on form in order to be paid.

Employee Name (Last, First, MI) _____ Employee ID _____ Primary Job Location (Bldg where you normally work) _____

Check box of your primary job / union: EA TA AFSCME(Office) Rehired Retiree Temp/Casual Student Worker

Indicate if this is your only job with SPPS or if you also hold another position: No other job Yes other position is _____
List your primary job (ie. Teacher, TA, EA, clerical)

Pay Period From: _____ to _____ Employee Signature: _____

A

Pre-determined pay rates -

<p>Oral Language Interpreters <i>(Must be on the approved interpreter list)</i></p> <p>Request initiated by: _____</p> <p><input type="checkbox"/> Interpreter: Language/Bilingual - (\$30/hr)</p>	<p>Misc Assignments @ reg rate <i>(optional)</i></p> <p><input type="checkbox"/> HR On-boarding for new hires <input type="checkbox"/> Interview Committee <input type="checkbox"/> Hotline for Homework <input type="checkbox"/> Dance Chaperone <input type="checkbox"/> Saturday School <input type="checkbox"/> Curriculum Writing <input type="checkbox"/> Workshop Attendance <input type="checkbox"/> Extra-Curricular / Lunchroom duty</p>	<p>Substitute Principal</p> <p><input type="checkbox"/> Asst Principal (\$300/day) <input type="checkbox"/> Principal (\$400/day)</p> <p>Child Care</p> <p><input type="checkbox"/> Child Care Wrkr (\$13/hr) <input type="checkbox"/> Child Care Lead (\$15/hr)</p> <p>Field Trips</p> <p><input type="checkbox"/> Overnight Field Trip - \$100 per night <i>(salaried employees)</i> <input type="checkbox"/> Overnight Field Trip - reg rate of pay <i>(EA, TA, clerical)</i></p> <p style="text-align: center;"><i>Overnight field trips for hourly staff are subject to overtime</i></p>
<p>Sign Language Interpreters</p> <p><input type="checkbox"/> 1:1 (\$22/hr) <input type="checkbox"/> Class/Sm Group (\$31/hr) <input type="checkbox"/> Large Public (\$41/hr)</p>		

B

Other pay— If paying a non-standard rate or amount, provide justification and documentation.

Regular Rate of Pay Other Hourly Rate*: _____ Stipend Amt *(consultants only)**: _____

Description of Work/Assignment: _____

*Justification of pay rate / amount: _____

C

Dates:	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	TOTAL
Hours Worked															

NOTE: A valid budget code (xx-xxx-xxx-xxx-61xx-xxxx) is required for these hours to be paid. Payroll will not process this form without a budget code listed below.

Budget Code: _____ @ _____ % and _____ @ _____ %

Contact Name *(printed)*: _____ Phone # _____ Contact E-mail: _____

Budget Administrator Name *(printed)*: _____ Program: _____

Budget Administrator Signature: _____