

## Interim Assignment Stipend Request Form

**Instructions:** Requesting department should complete the following form and obtain the necessary signatures. If the interim position is Director or lower, it only requires “Executive Director” approval. If the interim position is “Executive Director” or higher, it will require Chief (or higher) approval.

To qualify for an interim stipend, the employee must serve in interim assignment for at least thirty (30) days and the additional duties must be substantially greater than the employee’s normal duties. All interim stipends must meet the guidelines established in the HCM Supplemental Earnings Handbook.

Once the form is completed, please email to [notifycompsupl@dallasisd.org](mailto:notifycompsupl@dallasisd.org) and copy the Central Staff Talent Partner in HCM. In the subject line of the email, please type “INTERIM STIPEND REQUEST – (Name of Employee)”

REQUESTOR INFORMATION:		
Requestor Name	Department	Date of Request
TYPE OF REQUEST:		
<div style="display: flex; justify-content: space-between;"> <span>New Interim Stipend Request</span> <span>Renewal Date: _____</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span>Interim Stipend Renewal (Required after 60 days)</span> <span></span> </div>		
INTERIM ASSIGNMENT INFORMATION:		
Department	Interim Assignment (Job Name)	
Incumbent Name (or check “vacant” if no current incumbent)	OR	VACANT
INTERIM EMPLOYEE INFORMATION (STIPEND RECIPIENT):		
Interim Employee Name	Interim Employee ID	Current Job Name
INTERIM STIPEND INFORMATION:		
Interim Assignment Start Date	Interim Assignment End Date (if available)	Funding Source
APPROVAL:		
Requestor Name	Requestor Signature	Date
Executive Director Name <i>(Over Applicable Dept. or Division)</i>	Executive Director Signature	Date
Chief Name	Chief Signature <i>(Only Required if the Interim Assignment is “Executive Director”-level or higher)</i>	Date