

ELIDA LOCAL SCHOOLS

EXTENDED DAY WORKED AFFIDAVIT

Date

I, the undersigned employee of the Elida Local School District, worked the following extended day(s): (list dates) _____

Employee's signature certifies that he or she used an extended day in accordance with Elida Board of Education's Policy. *

Signature of Employee

Approved _____
(Signature of Principal or Assistant Superintendent)

Disapproved _____
(Signature of Principal or Assistant Superintendent)

Approved _____
(Signature of Superintendent)

Disapproved _____
(Signature of Superintendent)

Approved _____
(Signature of Treasurer)

Pay will be deducted for any extended day worked for which an approved Extended Day Worked Affidavit is not presented to the Treasurer of the Board of Education. If the extended day worked was for less than a whole day, please so indicate. This AFFIDAVIT shall be placed on file with the Treasurer within – 30 – days after the extended day is taken.

* Extended days are approved annually by the Elida Board of Education. Extended days are not cumulative from year to year but must be taken within the year approved by Elida Board of Education. Extended days worked must have prior approval of the Local Superintendent of Schools.