



# VICTOR VALLEY UNION HIGH SCHOOL DISTRICT

## Student Ratio Overage Time Sheet

Name: \_\_\_\_\_ Site: \_\_\_\_\_ Date: \_\_\_\_\_

Subject Area: \_\_\_\_\_ Overage Area:  Class Size  Case Load

Budget Number: \_\_\_\_\_

Date	Period	Overage 7-8 Grade (\$7.65 per stu.)	Overage 9-12 Grade (\$10.34 per stu.)

Date	Period	Overage 7-8 Grade (\$7.65 per stu.)	Overage 9-12 Grade (\$10.34 per stu.)

**I agree to accept up to three additional students above the student class size limits prescribed in CBA Article 16.**

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator Review

\_\_\_\_\_  
Date

***Employee: It is your responsibility to make certain that this form is submitted to the District Office Payroll Department no later than 4:00 p.m. on the 5<sup>th</sup> day of the month. If your form does not meet the deadline, your paycheck may not reflect the additional pay until the following pay period.***