Copy to:

## **Hertford County Schools**

## Extracurricular Duties Request Form

Please Check:								
	Teacher h	olding ar 1	n Initial	l Licens	se during fin	rst year of	teaching.	
	Teacher h	aving 27 27	or mor	re years 29	of experience 30+	nce.		
By my signatu the current sch	_	t the foll	owing	assignr	nents that a	re non-ins	tructional d	uties for
Please list assi	gnments be	low:						
Teacher's Pri	nted Name			Те	eacher's Sig	nature		
School				Da	nte			
			Princip	al's Sig	gnature			
			r					

Central Office Athletic Director (coaches only)

Central Office Personnel File