

ORCHARD PARK CENTRAL SCHOOL DISTRICT  
Orchard Park, NY 14127  
**SPECIAL ASSIGNMENT PAYROLL CLAIM FORM**

**SECTION 1: TO BE COMPLETED BY UNIT ADMINISTRATOR (Please Check One)**

Interscholastic

Athletics: ☐ Coaching (2855-150-17-0055) ☐ Chaperone (2855-150-17-0055)

Co-Curricular ☐ Intramurals (2850-150-00-0085) ☐ Chaperone – Events, etc. (2850-150-00-0085)  
Activities: ☐ Instructional Leader (Hourly) ☐ Chaperone - Detention/Suspensions (0055)

Misc. ☐ Additional 7% Stipend days (0055) Guidance/Psych ☐ Assessment Prep (Regents/AP/State)  
Activities: ☐ Community Education (2330-150) ☐ Blended / Co-Teaching  
☐ Home Teaching Services (2110-130-00-0008) ☐ Coverage Assignment  
☐ Curriculum Projects - RPEV (0055) ☐ Lost Prep/planning period  
☐ Summer Employment (0055) ☐ Miscellaneous (Other)  
☐ Scoring

**PAYROLL BUDGET CODE:** \_\_\_\_\_

**ACTIVITY:** \_\_\_\_\_

**NAME OF EMPLOYEE:** \_\_\_\_\_

**HOURLY RATE & TOTAL HOURS WORKED:** \_\_\_\_\_

**ADDITIONAL INFORMATION:**

<u>Dates:</u>	<u># of Hours:</u>	<u>Dates:</u>	<u># of Hours:</u>	<u>Dates:</u>	<u># of Hours:</u>

**TOTAL AMOUNT OF PAYMENT:** \$ \_\_\_\_\_ **PAYMENT DATE(S):** \_\_\_\_\_

\$ \_\_\_\_\_ **PAYMENT DATE(S):** \_\_\_\_\_

**PLEASE NOTE:** This claim must be received BY THE DEADLINE DATE before the special payroll dates, or payment will be held until the next special payroll date.

**SECTION 2: TO BE COMPLETED BY EMPLOYEE**

I, the under signed, accept the assignment and salary as stated above.

**EMPLOYEE SIGNATURE**

**DATE**

**UNIT ADMINISTRATOR SIGNATURE**

**DATE**