**Certificated Employee Form**

**Circle One:**

***Renew*** ***New***

Holtville
where tradition meets vision

621 East 6th Street, Holtville, CA 92250

# 2025-2026 *Certificated* 12-Month Pay Form

As per the agreement between the Holtville Teachers Association (HTA) and the Holtville Unified School District, HTA unit members ***may*** elect a 12-month pay cycle under the provisions of Article 21.4 of the HTA contract. To qualify for this provision, **unit members must submit this completed form by July 7th of the preceding year in which they would like to receive a 12-month pay cycle.**

The following will help to illustrate the effect of this **voluntary** election on the pay schedule.

**Hypothetical Pay Example**

Placement: Group 5, Step 10
Salary: 80,173.00

| Month | 11-month Pay | 12-month Pay |
|---|---|---|
| July 2025 | - | - |
| August | 7,288.45 | 6,681.08 |
| September | 7,288.45 | 6,681.08 |
| October | 7,288.45 | 6,681.08 |
| November | 7,288.45 | 6,681.08 |
| December | 7,288.45 | 6,681.08 |
| January | 7,288.45 | 6,681.08 |
| February | 7,288.46 | 6,681.08 |
| March | 7,288.46 | 6,681.08 |
| April | 7,288.46 | 6,681.09 |
| May | 7,288.46 | 6,681.09 |
| June | 7,288.46 | 6,681.09 |
| July 2026 | - | 6,681.09 |
| **Total Pay** | **80,173.00** | **80,173.00** |

**Certification of Participation in the 12-Month Pay Summer Saving Program**

By signing this form, I acknowledge that I am **voluntarily** participating in the 12-Month Pay Summer Saving program. I understand that the District has made no representation as to any tax or retirement implications of this **voluntary** program.

Employee Name: _____ Position:_____ Last 4 SS:_____

Signature: _____ Date:_____

Please submit this form no later than **July 7th to the District Office.**

*This institution is an equal opportunity provider and employer*