

Mustang Public Schools

New Supplemental Stipend Position Request Form

Teacher/Administrator Information

- **Name:** _____
 - **School Site:** _____
 - **Department:** _____
 - **Email:** _____
 - **Date of Request:** _____
-

Proposed Position Details

1. **Title of Proposed Extra Duty Position:**

2. **Description of Duties and Responsibilities:**
(Please describe the purpose of the position, activities involved, and intended student outcomes.)

3. **Estimated Hours Worked Outside of Contract Time (per week/season):**

4. **Estimated Number of Students Involved:**

5. **Will Students Participate in Competitions or Performances?**
 - Yes
 - NoIf yes, please provide details:

6. _____

7. Will a Class Be Offered During the School Day for This Activity/Program?

Yes

No

If yes, please describe the class and how it supports the extra duty activity:

8. _____

9. Number of Supervisors or Staff Required:

Please list names and roles (if known):

Additional Information or Justification:

(Optional – use this space to share why the position is necessary and how it supports school/district goals.)

Administrator Use Only

(To be completed by Principal or Site Administrator)

- Approved
- Denied
- Comments:

Administrator Signature: _____

Date: _____

Once you have approval from site administration please send it to Human Resources.
All requests must be turned into Human Resources by March 1st.