

SOMERS CENTRAL SCHOOL DISTRICT
IN-HOUSE CLASS COVERAGE BY TEACHER

NEW: These sheets must be handed in within 30 days of coverage date
NOTE: FIRST THREE PERIODS FOR THE YEAR ARE FREE.

SOMERS HIGH SCHOOL
ALL PERIODS=\$74.75 (56 Min.)

DATE: _____

BUILDING: SHS

PRINT NAME: _____

SIGNATURE: _____

DATE(S) AND PERIOD(S) OF COVERAGE:

Example: Date: 09/02/2025 Period: 6 Covered for: Ms. Somers

Date: _____ **Period:** _____ **Covered for:** _____

BUILDING PRINCIPAL APPROVAL: _____ **DATE:** _____

******COMPLETE AND RETURN FORM TO THE BUILDING SECRETARY FOR PRINCIPAL APPROVAL.**

PAYROLL USE ONLY: DO NOT WRITE BELOW THIS LINE PAYROLL USE ONLY:

Total Periods Covered: _____ **@ \$74.75**

3 Free complete? _____