

PINELLAS COUNTY SCHOOLS
EXTRACURRICULAR STUDENT ACTIVITIES
PAYROLL AUTHORIZATION FOR ATHLETIC EVENT STAFF

Filled Out by School

Last 4 Digits of SS

Employee Listed in TERMS

Job 19 ☐
Job 11 ☐

Name _____ Date of Birth _____ / _____
Month Day

Check One: ☐ Instructional (Job 19) ☐ Support (Job 11)

☐ Extra Game Athletics
(provide copy to bookkeeper)

School Name _____ Sport _____

Date Worked	Extra Game		Duty Performed	Hours Worked Support Only	Amount Due Instructional Only Per Fee Schedule
	Yes	No			
	☐	☐			
	☐	☐			
	☐	☐			
	☐	☐			
	☐	☐			
	☐	☐			
	☐	☐			

Sub Total \$ _____

Fringe \$ _____

Total Amount Due \$ _____

Approved for Payment:

School Activities Director

Date

County Director of Athletics

Date

FUND	FUNCTION	OBJECT	COST CENTER	PROJECT	SUBPROJ	PROGRAM	AMOUNT
0100	5100	0160					
0100	5100						
0100	5100						

Original – School

Instructional (Job 19) – Scan to Athletics Director

Support Staff (Job 11) – School Payroll