

MT. PLEASANT CENTRAL SCHOOL DISTRICT
2026-27

TEACHER COVERAGE PAYROLL FORM

All Timesheets and Extra Pay Forms must be submitted for administrator approval no later than two weeks following the date worked. Late submission will result in delay/denial of payment.

TEACHER'S NAME: _____

PAY PERIOD ENDING: _____ **SCHOOL:** _____

ALL INFORMATION MUST BE ENTERED FOR FORM TO BE PROCESSED

DATE	PERIOD	NAME OF TEACHER NEEDING COVERAGE	ASSIGNED (\$56.41)	UNASSIGNED (39.94)

Employee Signature: _____ **DATE / /**

APPROVED BY: _____ **DATE / /**
Building Administrator