

Community Unit School District 303

Human Resources Dept.

Request for Pre-Approval of Additional Activity Earnings (This form is for Educators in Planned Retirement only)

Name: _____ **Date:** _____

Position: _____ **Building:** _____

- 1) Educator must complete all agreed-upon extra duty activities included in their total base year earnings for the duration of their retirement incentive program prior to requesting any additional activities pay.
- 2) Educator must submit their Authorization for Stipend Payment form completed and signed by your Administrator with this form.
- 3) Educator must get all additional activities pay pre-approved by the Human Resources Department using this form.
- 4) No educator shall receive additional activities pay that will subject the Board to an additional contribution to TRS.

I've completed all agreed upon additional activities included in my total base year earnings and am requesting the review and pre-approval of the below listed additional activities pay for the current school year.

| Name of Additional Activity | Date(s) | Total Hours | Extra Pay Amount |
|-----------------------------|---------|-------------|------------------|
| | | | \$ |

Educator Signature: _____ **Date:** _____

Principal Signature: _____ **Date:** _____

HR USE ONLY

| | |
|-------------------|---|
| Base Year Salary: | Approved for Activity/Pay Amount \$ _____ Not Approved/Comments: _____ |
| 4% Increase: | |
| 6% Increase: | |
| Max Available: | |

HR Administrator Signature: _____ **Date:** _____

CC: Payroll
Personnel File
Educator