



PORT JERVIS CITY SCHOOL DISTRICT

# TEACHER EXTRA PAY CLAIM FORM

## 2023-2024 School Year

NAME \_\_\_\_\_ DATE \_\_\_\_\_

SCHOOL \_\_\_\_\_ ACCOUNT CODE \_\_\_\_\_  
(To be filled by District Office)

DATE	HOURS FROM - TO	Total hours (round to the nearest quarter)	PAY RATE	TOTAL PAY	EXPLANATION
			TOTAL	\$	

TEACHER SIGNATURE \_\_\_\_\_

SUPERVISOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Teacher Extra Pay Rate: \$46.23/hr

Home Instruction:

1 student - \$46.23/hr

2 students - \$69.35/hr

3 students - \$92.46/hr

Crowd Control (Supervision): \$30.53/hr

*All pay rates effective 7/1/23 - 6/30/24*

- This form is to be **completely** filled out by employee.
- Return to Supervisor for signature and verification of hours worked.