



THE SCHOOL DISTRICT OF UNIVERSITY CITY

Transform the Life of Every Student Every Day!

EXTRA DUTY REQUEST

Employee Name: _____

Explanation: _____

Estimated Hours Not to Exceed: _____

\$22/hour: (ex. Meetings, workshops, professional development)

\$27/hour: (ex. Tutoring, Saturday school, student screenings)

Total Request Not to Exceed: _____

Funding Source: _____

SIGNATURE

APPROVAL

Employee

Building Principal/Date

School/Department/Facilitator

Director of Instruction

Date

Chief Financial Officer/Date

* Signed copies of Extra Duty Request will be sent to Curriculum and Instruction and the Building Principal.

**Extra duties should not be performed until the employee is notified of approval by the Building Principal.

***Staff will not be paid for work performed prior to final approval and Time & Effort Log or Group Sign-In Sheets are received.

****All time & effort logs must be turned in prior to the last day of school in order to be paid by June 30th.
Due to the budget cycle, funds are not available after June 30th.