WESTERN PLACER UNIFIED SCHOOL DISTRICT
PAYROLL STIPEND FORM

ALL AREAS IN *ITALICS* MUST BE COMPLETED IN FULL. PLEASE SUBMIT SEPARATE STIPENDS ON SEPARATE STIPEND FORMS.

NAME: _____ ***WORK SITE:*** _____

SSN: _____ ***PROGRAM:*** _____

STIPEND DESCRIPTION: (i.e., Head Football Coach 2009, Yearbook Coordinator, PAR Panel 1st Qtr. 2009, etc.)
(Extra assignments from Certificated contract are listed on back of form.)
(Be sure to indicate if splitting stipend with someone else. Each person must complete a separate form.)

_____

_____

_____

_____

STIPEND AMOUNT: _____

I CERTIFY THE WORK WAS COMPLETED RELATED TO THE STIPEND ABOVE.

_____ _____

EMPLOYEE SIGNATURE: ***AUTHORIZING SIGNATURE:***

_____ _____

DATE: ***DATE:***

CODING TO BE COMPLETED BY SITE IF CHARGED TO SITE OR DESIGNATED TO A SPECIAL PROGRAM.

_____-_____-____-_____-_____-_____-_____-_____-_____

FD - RESC - Y - OBJT - SO - GOAL - FUNC - SCH - L1

DATE RECEIVED IN PAYROLL