

WELLINGTON EXEMPTED VILLAGE SCHOOL DISTRICT

EXTENDED SERVICE REPORT

Name: _____ Position: _____
(Printed)

Employees submitting this request for payment of extended service must have been previously contracted by the Wellington Board of Education for such time. The maximum payment will be for the number of days that have been approved on said contract.

In order to receive pay for the time reported and approved herein, this report is to be submitted to the building principal at least two (2) weeks in advance of a pay date.

No. of Extended Days Worked	Dates Worked	Description of Activity

Employee's Signature

Date Submitted

Principal's Signature

Date Approved

Superintendent's Signature

Date Reviewed

Treasurer's Signature

Dated Accepted for Payment

Payroll use only:		
No. Days: _____	Daily Rate: \$ _____	
Amount to Pay: \$ _____	Pay Date _____	Entered into Payroll by: _____