PICKERINGTON LOCAL SCHOOL DISTRICT

## **Class Size Overage Payment Form**

Class size overage payments include the first 10 days of school, unless adjustments can be made to reduce class size to 28 or less. (Reference Article 41 - Class Size)

Employee ID \_\_\_\_\_

Teacher (please print) \_\_\_\_\_\_ Date \_\_\_\_\_\_

Building/Specials Area \_\_\_\_\_\_Grade \_\_\_\_\_

## Note: Must be submitted to building principal/designee at the end of each grading period.

Homeroom Teacher Week:	1	2	3	4	5	6	7	8	9	10
Date:	9/1									
Sample – Math	30 2									

Total Load \_\_\_\_\_

## Office Use: TO BE COMPLETED BY PRINCIPAL

\_\_\_\_\_ Student(s) approved for overload payment - \$4.00 per student per class.

Week(s) approved for payment.

Principal's Approval