Application for Review of
Existing Extra-Duty Stipend Position
Due by – December 15th

Applicant's Name: _____ School: _____

1. What is the name of the activity? _____

   Circle Grade Level(s): K-5 6-8 9-12

2. Rationale for the suggested review: In your discussion, include information on one or more of the following points comparing the past with the present. Explain how changes have impacted your program thus giving reasons for your request.

   - The number of students participating in the activity
   - The number of student contact hours per week
   - The number of preparation hours per week
   - The starting and ending dates of the activity
   - The number of days you meet for the activity
   - The amount of weekend/vacation student contact time

   _____

   _____

   _____

   _____

   _____

3. Where on the present stipend schedule do you feel this suggested change would be placed in order for you to receive compensation in compliance with your request and comparable to an existing stipend? Briefly explain.

   _____

   _____

   _____

4. Please include any other information that you feel would be helpful in making this decision regarding this request.

   _____

   _____

   _____

   _____ _____

   Name Date

Copies to:

- Building Administrator
- Superintendent or designee
- KEA President or designee