



Anchorage School District Classroom Coverage Request for Compensation

Article 470 of the ASD/AEA contract provides for compensation for classroom coverage as follows:

- Middle and High School level: Use this form to request compensation when you have provided classroom coverage at the request of your principal or designee to cover for teacher absence. Compensation shall be paid at the rate of \$30 per class period.
- Elementary School level: Use this form to request compensation when you have provided classroom coverage at the request of your principal or designee to cover for a teacher-in-charge or when substitute teachers are unavailable. Compensation shall be paid at the following rates: one member, full class, \$30 per hour of coverage; two members split class, \$20 per hour of coverage for each member; three members split class \$15 per hour of coverage for each member; four members split class, \$10 per hour of coverage for each member; more than four members split class, no additional compensation.

Submit this form to your administrator for signature within 10 working days of the occurrence(s). The signed original form must be submitted to the Payroll Department within 15 working days for processing and payment.

| Last 4 SSN | Employee ID | Last Name | First Name | MI |
|------------|-------------|-----------|------------|----|
| | | | | |

| Position | Location |
|----------|----------|
| | |

| Date (MM/DD/YY) | Name of Teacher for Whom Coverage Was Provided | Hours | Payment Amount | Account Code GL Key – GL Obj |
|-----------------|--|-------|----------------|---------------------------------|
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| | | | | |

Employee Signature

Date

Administrator Signature

Date

Return this original form to the Payroll Department. Copies and/or forms without employee and administrator signatures will not be processed.