

Elementary Classroom Teachers
Monthly Class Size Payroll Change Form

Instructions: Staff, please complete and have your building administrator authorize your payroll change for **EACH** month your class size has exceeded the maximum limit. **This form must be completed and returned to the payroll office by the close of business on the 5th of each month for the prior month's overage.**

Certificated Staff Member:	
Grade Level:	Building:
Student Enrollment Number:	Limit:
Number Over:	
Overage Month:	

An employee stipend of \$50.00 for each student over the maximum class size target will be processed upon meeting the criteria as per the MEA Collective Bargaining Agreement.

Employee Signature

Date

Building Administrator Signature

Date

Superintendent Signature

Date

Payroll Date Received:	
Number of Students Over: _____ X \$50.00 _____	