APPOINTMENT AND AUTHORIZATION FORM
for Compensatory Emoluments & Instructional Chairperson Assignments

SCHOOL/WORK LOCATION	PRINCIPAL NAME
CONTACT PERSON	PHONE NUMBER
CONTACT PERSON'S EMAIL	DATE ENTERED IN ORACLE

_____

Last Name (please print) *First* *MI* *EIN*

has accepted appointment to the following assignment(s). It is understood that:

1. The requirements of this assignment have been established by the principal in advance.
2. This assignment will require no less than 40 hours (60 minute hours) in addition to the normal seven and one-half (7-1/2) hour day and is in addition to the standard teaching load for a regular day-school teacher.
3. If the sponsor of the activity receives compensatory time in the daily schedule (i.e., additional planning time) he/she must certify that 40 hours or more in addition to the regular 7-1/2 hour day are spent performing assignments during the school year as sponsor of an activity to be eligible for compensation.
4. A teacher will be **limited to two (2) emoluments and one (1) Instructional Chairperson** assignment. At the high school level, teachers will be limited to either 1 Instructional Chairperson **or** 1 Teacher Coordinator assignment.
5. This assignment will be satisfactorily completed by the teacher named unless its completion becomes impossible by the resignation/transfer or illness of the teacher, in which case the amount of compensation provided in the schedules may be divided among two teachers and prorated accordingly. In no case shall any compensation be paid until the activity has been completed.

Compensatory Emoluments/Activities – MAXIMUM of 2

EMOLUMENT TITLE (i.e., Enrichment, Service, Test Coor, Tech Coor)	ACTIVITY TITLE (i.e., Math Club, SGA)	PERCENT (50% or 100%)	AMOUNT
			$
			$

Instructional Chairperson/High School Teacher Coordinator Assignment – MAXIMUM of 1

ASSIGNMENT TITLE (i.e., Math Chair, 3rd Grade Lead)	TOTAL NUMBER OF TEACHERS IN DEPT	PERCENT (50% or 100%)	AMOUNT
			$

I accept the terms of this assignment and will have performed the assignment outlined above during the current school year.

_____ _____

Teacher's Signature *Date*

_____ _____

Principal's Signature *Date*

COMPLETED FORMS SHOULD BE SENT AS ONE FINAL SUBMISSION TO COMP.EMOL@PGCPS.ORG

HR APPROVAL	DATE