



## **ACE AFSCME Local 2250 Members Teacher or Nurse Coverage**

This form should only be used if time is submitted late. This form should only be used to report teacher coverage done by a paraprofessionals, ISEAs, ISSMs and Interpreters or nurse coverage by a nurse.

### **Instructions**

The document is designed to submit time for one ACE AFSCME Local 2250 Member (paraprofessional, ISEA, ISSM, Interpreter, Nurse).

1. Fill in the employee name, EIN and school name of the ACE AFSCME Local 2250 Member for whom reimbursement is being requested.
2. Fill in the name(s) of the teacher or nurse that coverage was provided for on the lines provided in the chart. If this is for a vacant position, designate Vacancy on the "Coverage For" line.
3. Provide the date or dates that the coverage was provided in the column designated for this information. This must be a single date such as 10/16/07 for each line.
4. Provide the number of hours worked each day (maximum of 6 hours) in the column designated for this information according to the requirements list below.
5. Principals must review and approve the assignments covered, the dates of the coverage and the hours worked.
6. Deliver the Retro Payment Form to Payroll Services via email to your Payroll Clerk.
7. The Union Contract language will be added to this form when it is available.
8. The document must be kept along with other payroll documents for the pay period and held for period of 5 years.