Ravena-Coeymans-Selkirk Central School P.O. Box 100 15 Mountain Road, Ravena, New York 12143 Ravena, NY 12143

CAFETERIA DUTY STIPEND FORM

| Print Name: | Date: |
|---|--|
| Cafeteria Duty at the Middle School and Hi assignment. Each period will be staffed for two teachers in each building who will be p district will select the participant from a list ability to remove or replace a participant if chosen from volunteer list as well. | r the duration of the period by aid \$3,000 each per year. The of volunteers and will have the |
| STIPEND TWO | |
| February, 20 – June, 20 | - \$1,500 |
| Please consider this as approval for the Cafeteria Duty stipend. It is understood that approval for stipend is based on successful completion of the duty and submission of documentation. | |
| Applicant's Signature (Please Sign & Return | rn) Date |
| Principal's Signature | Date |
| Director of Curriculum & Instruction/Bus. A | Admin. Date |
| Payroll Signature | Date Rec. |
| Original: Payroll Copy: Employee Personnel File & Applic | cant |

Revised 1/8/13