

# WELLINGTON EXEMPTED VILLAGE SCHOOL DISTRICT

## EXTENDED SERVICE REPORT

Name: \_\_\_\_\_ Position: \_\_\_\_\_  
(Printed)

Employees submitting this request for payment of extended service must have been previously contracted by the Wellington Board of Education for such time. The maximum payment will be for the number of days that have been approved on said contract.

In order to receive pay for the time reported and approved herein, this report is to be submitted to the building principal at least two (2) weeks in advance of a pay date.

No. of Extended Days Worked	Dates Worked	Description of Activity

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date Submitted

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date Approved

\_\_\_\_\_  
Superintendent's Signature

\_\_\_\_\_  
Date Reviewed

\_\_\_\_\_  
Treasurer's Signature

\_\_\_\_\_  
Dated Accepted for Payment

Payroll use only:

No. Days: \_\_\_\_\_ Daily Rate: \$ \_\_\_\_\_

Amount to Pay: \$ \_\_\_\_\_ Pay Date \_\_\_\_\_ Entered into Payroll by: \_\_\_\_\_