

Extra-Period Stipend Agreement

School Year: _____ - _____

Educator Name: _____

School Location: _____

Extra Period Authorization Details

1. Extra-period authorizations are based upon school need and enrollment/scheduling factors, as determined by the principal. Any extra-period authorization between a principal and an educator will exist only as long as the need within the school exists. All extra-period authorizations are temporary, offered at the principal's discretion, and are not part of the educator's contract in the Jordan School District.
2. A licensed educator's contract hours are typically 30 minutes before/after the bell schedule for full-time employment. Any educator agreeing to an extra-period authorization must work the equivalent of their prep period class time outside the contract hours. For instance, each 90-minute class period must work 3-4.5 hours per week outside their contract time. These additional hours involve lesson planning, providing feedback, and communicating with students and parents. The time and manner these additional hours occur can be determined between the principal and the educator.
3. If an educator agrees to an extra-period authorization, he/she is expected to meet all other duties generally required for educators (i.e., participation on assigned committees, collaboration, and other expectations).

Proposed Class Schedule:

Class Period	Semester 1 Course Title	Semester 2 Course Title	1st Semester Stipend (0.0835 FTE)	2nd Semester Stipend (0.0835 FTE)	Full Year Stipend (0.167 FTE)
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 (HS Only)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Acknowledgement of Acceptance:

By accepting this stipend, I understand it is not guaranteed and may be subject to revocation at any time due to factors such as student enrollment, budget restrictions, or other unforeseen circumstances. I also understand that this stipend is not guaranteed for future school years. I agree to fulfill all my duties as outlined, including working additional hours beyond the contract and participating in school activities as required.

Educator Signature: _____ Date: _____

Administrator Signature: _____ Date: _____

Please retain a copy of the signed agreement at the school location for the entire academic year indicated above. All requests for extra-period stipends must be pre-approved by your Administrator of Schools, entered on the school's enrollment dashboard, and submitted via Skyward to Human Resources for processing by September 5th (for the Full Year and 1st Semester) or by January 5th (for the 2nd Semester) for Payroll processing.