



HIGHLAND FALLS-FORT MONTGOMERY

CENTRAL SCHOOL DISTRICT

PO Box 287

Highland Falls, NY 10928

(845) 446-9575

PAYROLL CLAIM FORM - CHAPERONE

Employee: _____

School: _____

Address: _____

Pay Rate: \$20 per hour

| | |
|-------------------------------|--|
| Event: | |
| Date: | |
| Beginning Time: | |
| Ending Time: | |
| Total Number of Hours: | |

Please be advised:

1. Non-school day chaperones will receive \$20.00 per hour up to a maximum of \$160.00. The maximum amount of an overnight/weekend chaperone trip will be \$320.00.
2. If you choose to chaperone an event that takes place during the normal school day, there is to be no expectation of a chaperone stipend if the event goes beyond the normal school day.

Approval of Supervisor/Date _____

Requester Signature/Date _____

Approval of Asst. Supt. for Business/Date _____

For Business Office Use Only:

Units

Pay Rate

Amount

Notes