

**GARRETT COUNTY PUBLIC SCHOOLS
ASSIGNMENT TO EXTRA-CURRICULAR PAY POSITIONS**

To: _____ Base-School & Extra-Curricular School: _____
(Name)

You are hereby assigned as _____ at _____ for the school year _____. Your compensation for this activity outside the regular work week will be \$ _____ which is Step _____ of the Negotiated Extra Duty/Extra Pay Schedule.

The term of the agreement shall extend from _____ to _____, and shall automatically terminate and expire on _____.

Position, title and compensation shall be in accordance with the Extra Duty/Extra Pay Schedule as adopted by the Board of Education of Garrett County. All assignments are tentative pending facilities, student interest, and other necessary conditions. If a school fails to sponsor an activity or sport due to any of the above reasons, or if a coach or sponsor resigns, the contract will be prorated for days actually expended.

Date: _____
Base-School Principal's Signature & Extra-Curricular School Principal's Signature

Date: _____
Director of Secondary Education

Date: _____
Director of Human Resources

ACCEPTANCE

I voluntarily accept the position and conditions as indicated above and further agree to perform all duties required by the rules and regulations of the County Board of Education and the State Board of Education. I understand that all coaches shall have completed or be enrolled in the prevention and care of athletic injuries; possess AED/CPR Certification; and completed a current criminal background check.

_____ Signature	_____ Date	_____ Social Security or GCBOE Employee Number	_____ Telephone Number
_____ Date of Birth	_____ Address	_____ City	_____ State ZIP

(Must be signed and returned to the extra-curricular school principal on or before _____). Principals will submit this form to the Director of Secondary Education for Board of Education approval. Copies will be returned to the employee, principal, and the Finance Office.

DIST. NUMBER: [01.2030103.252.XXXX.00.0000.201302](#)

**REQUEST FOR ASSIGNMENT TO EXTRA/DUTY PAY POSITIONS
for First (1st) Time Employee for Specific Activity**

Name _____ School _____

Assignment Desired _____

Formal Training (College Preparation) for Assignment Desired _____

Actual Experience in Assignment Desired _____

Related Experience in Assignment Desired _____

Reasons for Seeking Assignment _____

(Signature)

(Date)

First (1st) time applicant MUST complete and submit with contract to the principal.