DIANE WORKMAN
Superintendent

724-775-5464
724-775-7644
FAX: 724-775-7434

Freedom Area School District
Administrative Offices

1702 SCHOOL STREET
FREEDOM, PENNSYLVANIA 15042

ERIN BLUEDORN, CPA
Business Manager
School Board Secretary

www.freedomareaschools.org

VERIFICATION OF COMPENSATORY TIME

*The top portion of this form must be completed with the building principal when requesting compensatory time.

FACULTY/STAFF MEMBER:_____

CIRCUMSTANCE REQUIRING ISSUANCE OF COMPENSATORY TIME FOR ADMINISTRATIVE WORK DAY:

_____

DATES OF SERVICE: ____/____/____ ____/____/____ ____/____/____

REQUESTING PRINCIPAL APPROVAL: _____ DATE: ____/____/____

SUPERINTENDENT AUTHORIZATION: _____ DATE: ____/____/____

For each Administrative Work Day worked, the employee shall receive an equivalent number of "off" days, as scheduled by the School District, during the yearly work calendar for bargaining unit employees. Such equivalent time may be scheduled by the School District in increments of less than a full workday and in a manner that will avoid or minimize the loss of teacher/student contact time. Such equivalent time will not be used to extend a holiday vacation or personal leave. At the sole discretion of the School District, in lieu of equivalent time, employees may be paid additional compensation for work performed on an Administrative Work Day in accordance with the parties' collective bargaining agreement.

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*This portion is to be filled out with the building principal when using compensatory time that was earned.

DATE(S) OF COMPENSATORY/TRADE TIME: Date___/___/___ Hours:___ Date:___/___/___ Hours___

Date___/___/___ Hours:___ Date:___/___/___ Hours___

REQUESTING PRINCIPAL (PRE-APPROVAL OF DATES): _____ DATE: ____/____/____

SUPERINTENDENT AUTHORIZATION: _____ DATE: ____/____/____