**DUE: June 14th, 2019** 

2018-2019 School Year (4/15/2019-5/23/2019) 28 Days

**Fourth Quarter: Grade Report** 

| SCHOOL NAME:  SCHOOL CODE#:  CHAPTER CHAIRPERSON SIGNATURE:  PRINCIPAL'S SIGNATURE: |                 |                     | CASE LOAD OVERAGES ONLY<br>GRADES PRK -12 |             |                   |            |                     | Please List any Paraprofessionals that Assist You: |                    |  |
|---|-----------------|---------------------|---|-------------|-------------------|------------|---------------------|--|--------------------|--|
|   |                 |                     |   |             |                   |            |                     |  |                    |  |
|   |                 |                     |   |             |                   |            |                     |  |                    |  |
|   |                 |                     |   |             |                   |            |                     |  |                    |  |
|   |                 | **Indicate          | the number                                | of students | on your case load | I that exc | eed the contractu   | al limit**   |                    |  |
|   | Please circle y | our classification: | ED  | CC          | MD/AU             | VI         | НН                  | MF   | PreK               |  |
| Name (Print)  | Last            | First               |   | EMPLOY      | EE ID NUMBER      | #          | OF STUDENTS<br>OVER |  | EMPLOYEE SIGNATURE |  |
| ,   |                 |                     |   |             |                   |            |                     |  |                    |  |
|   |                 |                     |   |             |                   |            |                     |  |                    |  |
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|   |                 |                     |   |             |                   |            |                     |  |                    |  |
|   |                 |                     |   |             |                   |            |                     |  |                    |  |
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|   |                 |                     |   |             |                   | <u> </u>   |                     | 1  |                    |  |

- \*\*\*\* IMPORTANT INFORMATION\*\*\*\* Teachers may only be compensated once per child in his/her classroom. If you have BOTH a class size overage and a Special Education overage you can only be compensated once.
- Supporting documentation MUST be attached. Payment will not be processed without backup documentation.
- Documentation must be your caseload list which can be created in IEPplus.
- \* Please clearly mark or highlight ALL Special Education students that appear on attached documentation.
- \* Roster and documentation <u>MUST</u> match or your forms <u>WILL</u> be returned.
- \* PAYMENT WILL NOT BE MADE UNTIL THE COMPLETION OF THE 2018/2019 SCHOOL YEAR (ON OR BEFORE JULY 15, 2019).