

DUE: February 22nd, 2019

2018-2019 School Year
Regular Classroom Special Education Overage Worksheet : GRADES PRK-3
(1/8/2019-2/1/2019) 18 Days
Third Quarter: Interim Period

D

Name: _____ Employee ID# _____ School: _____ School Code#: _____
Subject: _____

Please indicate the number of special education students mainstreamed into your regular education class that **EXCEED** the contractual limit. **The limit is 2 students per PRK class and 4 students per mainstreamed class for K-3.**

	Monday	Tuesday	Wednesday	Thursday	Friday	TOTAL
1st Period						
2nd Period						
3rd Period						
4th Period						
5th Period						
6th Period						
7th Period						
8th Period						
Total number of students over :						

- 1. If you have BOTH a class size overage and a special education overage you will only be compensated once.**
2. Please clearly mark or highlight ALL Special Education students that appear on attached documentation.
3. Label attached eSchoolPLUS supporting documentation with the day(s) and class period(s).
4. Worksheet and documentation **MUST** match or your forms **WILL** be returned.
5. Return this form and all supporting documentation to: **Areal Jones, Total Rewards Specialist.**
- 6. PAYMENT WILL NOT BE MADE UNTIL THE COMPLETION OF THE 2018-2019 SCHOOL YEAR (ON OR BEFORE JULY 15, 2019).**

SIGNATURES: CTU Member: _____ Date: _____
Chapter Chairperson: _____ Date: _____
Principal: _____ Date: _____