

Send completed forms to Human Resources
Human Resources will send to Payroll and
Accounting Effective 12/11/2018

**HUNTINGTON BEACH CITY SCHOOL DISTRICT
HUMAN RESOURCES**

**REQUEST FOR BOARD APPROVAL
CERTIFICATED STIPENDS**

Must be submitted 10 working days prior to Board Meeting

Submitted by: _____ Date: _____

RECIPIENTS: NAME LOCATION
(Please attach a list if more than 3 names)

DESCRIPTION OF ACTIVITY: (be descriptive)

ACTIVITY DATE/S: _____

hours _____ Rate of Pay: \$40.606/hour – Column III, Step 1 (**PLUS** benefits)

OR \$ _____ (**PLUS** benefits) **OR** \$ _____ (**MINUS** benefits)

Account # _____ Dept/Site: _____

Invoice for Reimbursement: _____

<u>Fixed Charges:</u>	<u>Charge</u>	<u>Acct. #</u>	<u>Amount</u>
	Stipend Amount	1135	\$ _____
	STRS (.16280)	3101	\$ _____
	Medicare (.01450)	3313	\$ _____
	Unemploy (.00050)	3501	\$ _____
	W/Comp (.02350)	3601	\$ _____

Total	\$ _____
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Department Approval: _____

Signature

Date

Human Resources Approval: _____

Signature

Date

Accounting Approval: _____

Signature

Date

Categorical Budget Approval: _____

Signature

Date

Board Meeting Date: _____

Original: Human Resources