



**Flagler County Schools
Human Resources Department
Salary Supplement Request**

Dept./School: ITMS	Effective Date of Supplement: 7/1/2020	
**COACHING WILL NOT BE ALLOWED UNTIL A VALID CERTIFICATE HAS BEEN ISSUED **		
Recommendation for salary supplement to be awarded to:		
Supplement to be Awarded to <u>Paul Peacock</u> Last 4 digits of SSN: <u>2642</u>		
for extra activities and responsibilities required in the following positions as indicated on the officially adopted instructional salary supplement schedule.		
**VALID COACHING CERTIFICATE <input type="checkbox"/> **VALID FINGERPRINTS <input type="checkbox"/>		
**COACHING PAYMENT WILL NOT BE ISSUED UNTIL THE ABOVE REQUIREMENTS ARE MET.		
CLUB SUPPLEMENTS WILL BE PAID ACCORDING TO DISTRICT PROCEDURES		
COACHING SUPPLEMENTS ARE PAID THE 15TH OF NOVEMBER, DECEMBER, FEBRUARY, MARCH, MAY. MONTH OF PAYMENT IS DEPENDENT UPON END OF INDIVIDUAL SPORT SEASON		
211600		
Account Code Strip: FUND <u>0100</u> FUNCT <u>e7300</u> OBJ <u>0110</u> CTR <u>0401</u> PROJ <u>19600</u>		
Name of FCEA Salary Supplement	Start/End Date	Amount
FCEA Collective Bargaining		\$1500.00
Total		\$1500.00

PAYMENT OPTIONS:

Recommended By: _____
Principal

Signature of Employee

Date: _____

Dept./School Bookkeeper

Copies:
 Human Resources
 Employee Personnel File
 Principal's File
 Employee

Approved By: _____
**Athletic Director

Approved By: [Signature]
Superintendent or Designee