



## MERCED UNION HIGH SCHOOL DISTRICT PAY FOR SERVICE CONTRACT

**Name:** \_\_\_\_\_ **Site:** \_\_\_\_\_ **School Year:** \_\_\_\_\_

**Internal Ref No (found on ID badge):** \_\_\_\_\_ **Effective Date:** \_\_\_\_\_

**Contract Type:**     Extra Duty     Coach     Extra Period     Department Chair Stipend     Other

**Staff Member Classification:**     Certificated     Classified

**Service(s):** \_\_\_\_\_

**Completion Date:** \_\_\_\_\_

**Gross Salary/Stipend:** \_\_\_\_\_

**Method to be paid:**     Monthly-End of Month     One-time payment upon completion  
 Other (describe specifics below)

**BUDGET NUMBER:**

*Budget# must include:*

Fund	Resc	Yr	Object	Sub-Obj	Goal	Function	Site	DD1	DD2

### Expenditure is Compliant with School Site Plan (If applicable)

School Authorization:    Page & Item #: \_\_\_\_\_    Site Admin: \_\_\_\_\_

District Authorization:    \_\_\_\_\_    Date: \_\_\_\_\_

The undersigned agrees to these conditions:

Contract Initiated by: \_\_\_\_\_ Date: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Administrator Name (print)
Signature
Date

\_\_\_\_\_  
**Assistant Superintendent of Business Services**
Date

\_\_\_\_\_  
**Assistant Superintendent of Educational Services**
Date

**STEPS IN PROCESSING Pay for Service Contracts:**

- |  |  |
|--|--|
| 1. Form & Sign In Sheet Backup submitted to HR                         | 4. Returns to Categorical (Based on Resource)/HR         |
| 2. Categorical Office Approves (Based on Resource)Business Office      | 5. HR Asst. Superintendent Approves, Copies Disseminated |
| 3. Business Confirms/Opens Account & Assistant Superintendent Approves | 6. Original Hard Copy to Payroll                         |
|  | 7. Electronic Sign In Forwarded Upon Request             |

Copies to:     Categorical     Employee     Human Resources     Payroll     Pers. Report     Site