

**DOUGHERTY COUNTY SCHOOL SYSTEM
ADDITIONAL COMPENSATION AGREEMENT
(SCHOOL SYSTEM EMPLOYEES ONLY)**

This Agreement is voluntarily entered into between the Dougherty County School System and

_____ for additional services
(Employee Name)

Detailed information as to services and dates will be provided in writing and attached to this agreement when needed.

Expenditures will be charged to: _____ Program.

Services will be provided at the rate of \$ _____ per hour or \$ _____ per day for
_____ hours/days or a flat rate of \$ _____.

From _____ To _____
(Month/Day/Year) (Month/Day/Year)

This document only sets the stage for the work to be provided. An EXPENSE STATEMENT must be turned into Business Services containing the following: 1) Name and social security number; 2) Dates and times work was provided; 3) Signature of Program Director. No funds can be paid without this information. This form must be approved in advanced of work performed.

Only expenses provided for in this agreement will be reimbursed.

Any materials or Final Product resulting from this period of service will become the sole property of the Dougherty County School System.

Is Teacher's Retirement applicable? yes no

Employee is currently working as: _____.

(Employee's Signature) (Date) (Social Security #)

(Program Director's Signature) (Date) (Program Title)

(Employee Number) Fund . Facility Program Budget . Function Object

(Executive Director, Finance & Operational Services) (Date)