

MANCHESTER LOCAL SCHOOL DISTRICT
Request for Coaching Supplemental Contract Pay

I, _____ am requesting
(employee name)

full or **1st partial** or **final partial** payment for supplemental contract
(Circle one)

services as _____.
(position)

The following **MUST** be attached for the final supplemental contract payment:

- Roster/Eligibility list of Students
- Inventory
- Final Game Schedule
- Pupil Activity Supervisor License
- NFHS Fundamentals of Coaching Certificate

Employee Signature Date

Athletic Director Date

Principal Date

\$ _____ Date Paid _____
Acct. _____