Work record for Faculty Senate recommendation



Form HR-007 Revised 4/30/2015

Pursuant to West Virginia Board of Education Policy 5000 section 7.3, classroom teachers who directly participate in making recommendations for classroom teaching positions in accordance with the same policy and do so outside of their regular contracted time shall be compensated.

Employee information						
Name						
Preferred phone				Employee ID		
Preferred er	mail	9 5 4 0 0				
Work record	d details					
separate form fo worked. Pursuar	r each recommendation. In either	case, the actual time spent of than two hours may be paid	on the	s made as part of a single work s recommendation must be record ach position, except in the case w	ed along with the total hours	
POSITION						
START TIME						
END TIME						
TOTAL HOURS WORKED						
TOTAL HOURS PAID						
Pursuant to West Virginia Board of Education Policy 5000, faculty senate members must complete interview Employee signature and acknowledgement						
training as designated or approved by the West Virginia Department of Education prior to participation in the recommendation process.		he By signing here, I cert	By signing here, I certify that I am the above named employee and that I submit this work record in good faith, having participated in the recommendation process for the above			
Work records restablished by the	nust be submitted by the deadling Finance Department. Failure to me may result in a delay in payment.	nes named classroom to acknowledge that I h	named classroom teacher position(s) outside of my regular contracted time. I acknowledge that I have read and understand the provisions of WVBE Policy 5000 and Mingo County Board of Education policies, as applicable.			
	participation in the recommendati sidered regular income and are subje					
to withholdings.		S	SIGNATURE		DATE	
PRINCIPAL'S			PAYROLL INFORMATION			
,	re, I verify that the above named o		poom teacher did participate TOTAL Findings and did so outside of		ID	
	r contracted time.	position(s) and did so outside			TE	
				HOURLY RA	TE	
	SIGNATURE	DATE		TOTAL PAYMENT DU	JE	

FOR OFFICE USE ONLY

DATE RECEIVED

SOURCE