



Prince George's County Public Schools
PAYROLL SERVICES DEPARTMENT

Signature Required Upon Submission
 Email to Payroll Clerk
**FILE COPY KEPT IN SCHOOL
 FOR 5 YEARS**

Time TRACKING for ACE AFSCME LOCAL 2250 Members for Teacher Coverage (PARA-PROFESSIONALS, INTERPRETER, ISEA, and ISSM) And Nurses for Nurse Coverage

Pay Period End Date: _____

School Name: _____

Hours Type: Local 2250 Acting Pay

Coverage by <i>(Para, Interpreter, ISEA, ISSM, Nurse)</i>		Coverage For <i>(Teacher or Nurse)</i>		Start and End Time Coverage Provided		Hour(s) Coverage Provided	Dates Coverage Provided	Initials	Entered On Time Card
NAME	EIN	NAME	EIN	<i>Example: 7:15 am-12:15 pm 1:15 pm to 2:15 pm</i>		<i>(Hours per day- max 6 hours for teacher coverage or 8 hours for nurse coverage)</i>		<i>Secretary Initials</i>	

Principal Signature: _____

Date: _____

Guidelines

1. As outlined in the negotiated agreement, paraprofessional educators, Itinerant Special Education Assistants (ISEA), In School Suspension Monitors (ISSM) will not be required to substitute for teachers, nurses, etc. except in emergency situations and for a limited and reasonable duration. Nurses may only be asked to cover for other nurses not for teachers.
2. Paras, ISEAs, ISSMs, Interpreters who serve as a substitute teacher or nurses covering for another nurse shall receive an hourly rate of \$18.00 per hour. This amount will be in addition to the regular pay.

ACE AFSCME Local 2250 Members Teacher or Nurse Coverage

This form should only be used to report teacher coverage done by a paraprofessionals, ISEAs, ISSMs and Interpreters or nurse coverage by a nurse. Such time should be reported on a biweekly basis using the OTL Timecards using the "Local 2250 Acting Pay" hours type.

Instructions

The document is designed to track time for ACE AFSCME Local 2250 Members (paraprofessional, ISEA, ISSM, Interpreter).

1. Fill in the employee name, EIN and school name of the ACE AFSCME Local 2250 Member for whom reimbursement is being requested.
2. Fill in the name(s) of the teacher or nurse that coverage was provided for on the lines provided in the chart. If this is for a vacant position, designate **Vacancy** on the "Coverage For" line.
3. Provide the date or dates that the coverage was provided in the column designated for this information. This must be a single date such as 10/16/07 for each line.
4. Provide the number of hours worked each day (maximum of 6 hours for teacher coverage or 8 hours per day for nurse coverage) in the column designated for this information.
5. Principals must review and approve the assignments covered, the dates of the coverage and the hours worked.
6. The Union Contract language will be added to this form when it is available.
7. The document must be kept along with other payroll documents for the pay period and held for period of 5 years.