Wright Elementary School District
CLASSIFIED *Supplemental Pay Authorization*   **Month(s)**_____ **20**_____

Employee Name _____   Emp ID/Last 4 SSN#_____

Select one ⭕ Regular Employee (Extra hours OR Overtime) ⭕ Substitute ⭕ Classified WESD Retiree Substitute

Site - select one ⭕ JX Wilson ⭕ RL Stevens ⭕ Wright Charter School ⭕ District Wide ⭕ District Office

	Hours From	Hours To	Total Hours	Position/Reason	Approved
24					
25					
26					
27					
28					
29					
30					
31					
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					

Total Regular Hours _____ Total Overtime Hours_____

Employee Signature _____ Date _____   Approved by _____ Date _____

Month/Add-On	Pay Rate	X	Units	=	Gross Pay	Account Code
	TOTAL $				Date Entered	Entered By

Supplemental pay runs from the 24th through the 23rd of the next month and it is paid on the 10th of the following month.