GALT JOINT UNION ELEMENTARY SCHOOL DISTRICT
PAYROLL REQUISITION SCHOOL SITE USE
Reporting of Classified Substitute
Due by the 15th of the Month

Department/School _____ Employee Placing Order _____ Date _____

Fill out for Substitutes.

Date of Sub	Substitute Name	Employee Name	Purpose/Reason	Hours	Rate*	Total
	***Average Classified Rate = $20.23**			**Sub total**		
	Benefit rates: Classified PERS 37.411%, Classified Non-Pers is 10.361%			**Benefit rate**		
				Total		

Funding/Resource			Amount
Site			
Lottery			
Supplemental Concentration			
Title 1			
Title 1 Parent Participation			
Donations			
Preschool			
Transistional Kindergarten			
Sped.			
Other			

Employee:_____
Date

Site Dept. Admin.:_____
Date

District Dept. approval:_____
Date

District Approval:_____
Date

Account Code	Budget Amount