

BRAZOS INDEPENDENT SCHOOL DISTRICT

AFTER DUTY PAY

Name: _____

Campus: _____

Position: _____ Teacher _____ Aide _____ Support Staff

Duty Assigned: _____ After School Tutorials _____ Saturday School Tutorials
_____ After School Detention _____ Saturday School Detention
_____ Homebound School _____ Summer School
_____ (other, please describe) _____

Date	Time Started:	Time Ended:	Total Time

Total Time: _____

Employee Signature: _____

Supervisor Signature: _____

Budget Code: _____