

Dundee Teacher Overages Form

All Grade Levels

Teacher Name:

School Year and Semester:

Date:

Days in Semester:

Building:

Semester days should include all days you had instruction of students in class.
If you have different amounts of overages in 1 class period, use a separate form.

Total Students Over Class Size	# Overages	# Days	Class or Grade	Total Overage	Total Per Class	Dates of Overages
Numer of students overages ___ hour				X \$3	\$	
Numer of students overages ___ hour				X \$3	\$	
Numer of students overages ___ hour				X \$3	\$	
Numer of students overages ___ hour				X \$3	\$	
Numer of students overages ___ hour				X \$3	\$	
Numer of students overages ___ hour				X \$3	\$	
Total Amount Due for Semester Overages					\$	

Elementary Student Overages X \$10

\$

Y5's/Kindergarten 27 students
1st - 6th grade 28 students
7th -12th 32 students

Elementary Grades \$ 10 per day, per student
Secondary Grades \$3 per student, per class

Teacher Name and Date:

Principal Signature and Date: