Appendix C: REQUEST FOR CURRICULUM DEVELOPMENT PAYMENT

Date of Request:
Name:
Curriculum/Course being developed:
Proposed dates and time of work:
Estimated number of hours required to complete work:
Amount requested for reimbursement (please refer to the bargaining unit contract for the hourly
curriculum development rate):
Please describe the specific tasks that will be completed. Identify any additional support (personnel, resources, materials) that you will require:
The work has been recommended and approved by the curriculum facilitator/instructional leader/district
coordinator/building administrator
Name:
Title:
Date of approval:
Principal approval:
Date:
☐ Request Approved
Request Denied
Assistant Superintendent Signature:
Date:

If approval is granted, please use a timesheet and submit in writing the dates and hours worked and the product to the Central

Office for reimbursement.